



GEORGIA DOMESTIC VIOLENCE

FATALITY REVIEW PROJECT

GEORGIA COMMISSION ON FAMILY VIOLENCE | GEORGIA COALITION AGAINST DOMESTIC VIOLENCE





WE DEDICATE THIS REPORT

to victims, their children, and family members who lost their lives as a result of domestic violence; to their surviving children, family members, and friends who must go on without them; and to victims who navigate survival every day.

01

Introduction	2
---------------------	---

02

Lethality Indicators	7
-----------------------------	---

03

10 Key Goals to Improve Domestic Violence Response in Georgia	19
--	----

1 Increase opportunities for accountability for batterers	20
2 Utilize all legal means to restrict abuser access to firearms	23
3 Build the capacity of bystanders to support survivors and hold abusers accountable	28
4 Develop state and local strategies to increase awareness of healthy relationships to prevent dating violence	30
5 Ensure victims of domestic violence receive risk assessment and safety planning at all points of contact with helping professionals	34
6 Increase efforts to incorporate awareness of co-occurring issues and participate in cross-training among allied professionals	37
7 Incorporate assessments for stalking behaviors and ensure measures are taken to address the problem	40
8 Provide supportive services to children exposed to domestic violence or who lost a parent to domestic violence homicide	44
9 Improve access to culturally relevant services for victims from marginalized communities	48
10 Address barriers that exist for victims to ensure ongoing safety and financial security	52

04

Summary of Project Data	58
--------------------------------	----

05

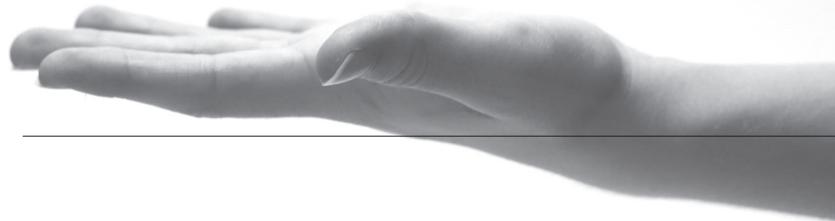
Citations	70
------------------	----

06

Acknowledgements	75
-------------------------	----

Regarding Gender Language in this Report

According to the Bureau of Justice, women account for 85 percent of victims of intimate partner violence and men account for the remaining 15 percent (Catalano, 2015). The majority of domestic violence homicides in Georgia tracked by the Project involve men killing women in heterosexual relationships. The language we use in this report reflects these realities. However, it should not be construed to suggest that all victims are women and all perpetrators are men. Men are also abused in intimate partner relationships and are sometimes killed.



24-HOUR STATEWIDE DOMESTIC VIOLENCE HOTLINE:
1 (800) 33-HAVEN [1 (800) 334-2836] SE HABLA ESPAÑOL

01

Introduction



In-depth reviews of domestic violence-related fatalities and near fatalities have proven to be a useful tool for generating important conversations and shedding light on the problem of domestic violence. This report is a summary of 15 years of work by the Georgia Domestic Violence Fatality Review Project (“the Project”) and provides an overview of all we have learned, both in Georgia and nationally, about gaps in the systemic response to domestic violence and the circumstances which surround deaths which have occurred as a result of relationship violence.

The Project, in its current incarnation, will come to a close December 31, 2018. The Project’s 14 previous Annual Reports, published between 2004–2017, have detailed the problems raised in case reviews, provided data and trends, and given voice to victims who lost their lives in our state. This Annual Report is the final Georgia Domestic Violence Fatality Review Annual Report and serves as a capstone for all previous reports. This report seeks to both encapsulate the important work done statewide in the past 15 years and to make recommendations for addressing the problem of domestic violence in Georgia moving forward.

HISTORY OF THE GEORGIA DOMESTIC VIOLENCE FATALITY REVIEW PROJECT

In 2004, the Georgia Commission on Family Violence (GCFV) and the Georgia Coalition Against Domestic Violence (GCADV), with funding support from the Georgia Criminal Justice Coordinating Council, joined together to start the first statewide initiative to review domestic violence-related deaths in Georgia. The Project grew out of the need to evaluate factors which influenced the high rate of domestic violence-related homicides in Georgia.

Every year, on average, 130 Georgia residents lose their lives to domestic violence. Most of these individuals are killed by a current or former intimate partner, but the number also includes children, family members and others killed during the course of domestic violence-related incidents. These statistics also include deaths of alleged perpetrators, most of whom died by suicide after killing or attempting to kill the victim(s). Georgia consistently ranks in the top 25 states for the rate at which men kill women — and in recent years, often ranked in the top 10.

Data about the specific rate of domestic violence-related deaths in Georgia is available at GeorgiaFatalityReview.com/resources. You can also visit the Violence Policy Center at VPC.org for up-to-date information on Georgia’s domestic violence homicide rates and other current trends in the United States.

At the time of the Project’s inception, no data was being collected in Georgia to determine which practices increased or decreased safety for victims of domestic violence. However, family violence task forces and domestic violence programs seemed acutely aware of practices which adversely impacted victims in their communities. These stakeholders believed that addressing detrimental practices — such as high rates of dual arrest, law enforcement engaging in mediation or separation on domestic violence calls, dismissal of criminal complaints when victim testimony was not secured, and low-intensity probation supervision on all cases, regardless of severity — would provide important advances in public safety. Several family violence task forces indicated data was needed to identify and make the necessary systemic changes needed to reduce future homicides.

Georgia contains 159 counties, 49 judicial circuits and over 600 law enforcement agencies, and includes communities of vast differences in size, economy and culture. These factors, coupled with a lack of statewide data collection, presented great challenges in identifying statewide trends in domestic violence response and applying statewide solutions. The implementation of the Project offered a solution to address these issues and more.

The Project sought to reduce domestic violence-related fatalities by using information learned from past incidents to shape statewide policy, change protocols and strengthen

local community responses to intimate partner violence. To accomplish this goal, the Project developed Fatality Review Teams (FRTs) around the state. With assistance from Project staff, FRTs identified domestic violence-related fatalities in their communities, gathered and synthesized public records pertaining to the selected cases, and convened meetings with other community stakeholders to conduct reviews of the circumstances which led up to the fatal incidents.

Georgia's fatality review model and methodology were developed in consultation with nationally recognized fatality review experts. Although there were some adjustments to the methodology during the Project's 15 years, the overall structure of the Project's process remains unchanged. To ensure a process which was both trauma-informed and centered on developing systemic change, policies and procedures were created to address:

- + team formation
- + case selection
- + case information and collection
- + family and friend interviews
- + case chronology development
- + fatality review meetings
- + development of findings and recommendations
- + data analysis
- + reviewing near fatalities (incidents of attempted homicide in which the intimate partner victim survived the attack)

The complete Fatality Review Policy and Procedures Manual is available for download at GeorgiaFatalityReview.com/resources.

PROJECT ACCOMPLISHMENTS

Over the past 15 years, the Project has honored the lives of 119 victims killed and nine near-fatality survivors of domestic violence incidents reviewed by the Project, by learning valuable lessons from their stories. Since 2004, the Project has worked with 24 communities across the State of Georgia to review 116 fatal and near-fatal cases and look critically at the circumstances leading up to each fatal incident. During this time, 887 professionals from a wide range of disciplines have participated in domestic violence fatality reviews.

Fatality reviews have provided local communities and statewide systems with both qualitative and quantitative data, often necessary to facilitate systemic changes which improve safety for victims and accountability for perpetrators. The fatality review process also led to an increase in intentional and effective partnerships, system collaboration and sincere effort to reduce the number of complicated barriers victims face when navigating the safety issues presented by abusive relationships.

As we look back at the Project's 15 years of work, much of what we set out to do has been accomplished. During the course of the Project we have:

- + Developed a process and foundation for the vital work of domestic violence fatality review in Georgia, including a policies and procedures manual, a near-fatality review model, and a website dedicated to fatality review work
- + Assembled and led multidisciplinary FRTs in 24 judicial circuits to conduct in-depth reviews of 116 domestic violence-related homicides, suicides, murder-suicides and near fatalities
- + Raised awareness and promoted critical thinking about the problem of domestic violence as a means of fostering conversation and collaboration statewide
- + Prepared and published objective information gained from fatality reviews in 15 Annual Reports, each giving voice to victims so as to learn from their experiences as we seek to prevent future tragedies
- + Identified gaps in system responses and critical points for intervention or prevention
- + Implemented recommendations to create a coordinated community approach to ending domestic violence, including significant efforts towards training varied systems on better responses and creating innovative partnerships with other disciplines
- + Exposed and explored the dangers created when individuals or systems engage, consciously or unconsciously, in victim-blaming and increased understanding of how a culture of victim-blaming can be detrimental to victims of domestic violence
- + Served as a practical tool for all those who wish to eliminate domestic violence in Georgia by providing current data and analysis, mapping trends, summarizing recent history, and exposing barriers to safety and survival for victims of domestic violence

In addition to those accomplishments, the Project's findings

have been instrumental in driving legislative and public policy advocacy efforts within the Georgia General Assembly, to ensure the interests and rights of domestic violence survivors are protected and upheld. These are several public policy accomplishments during the Project's existence:

- 2012** Spousal privilege was eliminated in crimes committed against the spouse.
- Communications between advocates at Georgia's domestic violence and sexual assault centers and the victims they serve were made confidential.
- 2013** Law enforcement was authorized to arrest on non-violent violations of bond and probation conditions in domestic violence offenses.
- 2014** Language was added to the existing aggravated assault statute to make the act of strangulation assault a felony offense.
- 2015** Eligibility for the receipt of unemployment benefits was extended for victims of domestic violence who voluntarily left their employment as a result of violence, creating a new exception for family violence victims when determining good cause and the payment of unemployment benefits.
- The harassing phone calls statute was revised to include harassing or threatening electronic harassment. The offense was determined to have been committed when repeated communications are made and when the offender's intent is to harass, molest, threaten or intimidate. In addition, it was determined the crime could be considered to have occurred where the communication was sent or received.
- The statute authorizing Georgia's Protective Order Registry was amended so criminal family violence orders, including stay-away orders in bond or probation conditions, could be entered. Access to the electronic registry was also expanded to all law enforcement, the courts and prosecuting attorneys.
- The amount payable for funeral expenses in the compensation of crime victims was increased, doubling the potential award from \$3,000 to \$6,000. The pool of claimants was also expanded to include individuals related by marriage.
- 2016** The provisions related to family violence battery were changed, ensuring upon new arrests for family violence battery, offenders with a previous family violence battery conviction against the same victim, or with a

felony conviction against any household member, would be convicted of a felony.

- 2017** Protections for victims of domestic violence were streamlined, so they no longer had to publish their requests for a name change in the local newspaper.
- 2018** Housing protections for victims of family violence were enhanced by allowing early termination of a residential lease without financial penalty in circumstances involving domestic violence.
- The statute was modified to allow courts to delay dismissal of a petition for a Temporary Protective Order for an additional 30 days if a party is avoiding service to delay a hearing.

LOOKING FORWARD

Despite our many accomplishments, GCFV and GCADV acknowledge there remains significant work to be done to address the Project's findings and to eliminate domestic violence in Georgia. We see the next phase of our work focusing on learning more information about a larger quantity of cases and championing new initiatives to implement Project recommendations.

The Project, domestic violence task forces and other valued stakeholders have proven over the past 15 years that together, we can accomplish much. But even with the Project's compelling achievements and the State's victim-positive policy changes, there remains much work to be done. It is not enough to just review cases. In order to truly honor the lives lost in these tragedies, we must take action.

The problem of domestic violence cannot be solved by one person, one agency, or one system alone. Necessary change will not be generated by a small number of dedicated individuals — to engage in the level of community change necessary to end domestic violence and reduce its life-endangering hold on families in Georgia, buy-in is required from frontline workers, decision makers and everyone in between.

This report draws on many valuable lessons learned from a decade-and-a-half of reviews and analysis, and sets out 10 key goals for change in our response to domestic violence. Beginning on page 20, these goals are the roadmap for addressing the complex issues which still exist. Each has great potential to increase safety for victims, strengthen accountability for abusers, and reduce the number of domestic violence-related fatalities in Georgia.

10 KEY GOALS TO IMPROVE DOMESTIC VIOLENCE RESPONSE IN GEORGIA

- GOAL 1** Increase opportunities for accountability for batterers
- GOAL 2** Utilize all legal means to restrict abuser access to firearms
- GOAL 3** Build the capacity of bystanders to support survivors and hold abusers accountable
- GOAL 4** Develop state and local strategies to increase awareness of healthy relationships to prevent dating violence
- GOAL 5** Ensure victims of domestic violence receive risk assessment and safety planning at all points of contact with helping professionals
- GOAL 6** Increase efforts to incorporate awareness of co-occurring issues and participate in cross-training among allied professionals
- GOAL 7** Incorporate assessments for stalking behaviors and ensure measures are taken to address the problem
- GOAL 8** Provide supportive services to children exposed to domestic violence or who lost a parent to domestic violence homicide
- GOAL 9** Improve access to culturally relevant services for victims from marginalized communities
- GOAL 10** Address barriers that exist for victims to ensure ongoing safety and financial security

Each of the 10 key goals includes brief recommendations for the implementation efforts required to reduce incidents of domestic violence and domestic violence-related homicide. These recommendations were developed by FRTs across the state and the solutions can be applied to any community, even those which have not formally conducted a fatality review.

Many systems in Georgia are already employing best practices to address domestic violence and improve victim safety and offender accountability. We appreciate the communities that have implemented past Project recommendations and encourage those individuals, agencies and systems to continue their important work and mentor others who are seeking to strengthen their own response.

Domestic violence response is difficult work. Stakeholders have reported that low levels of community engagement, lack of funding and lack of collaboration with other partners often hinder communities' efforts to implement best practices. Do not be dissuaded from taking steps to move this vital work forward. To affect change, local communities must work diligently to implement the recommendations which have come from past fatality reviews. Acting on established best practices and calls to action from the Project's 15-year history is how Georgia will see real change in the future.

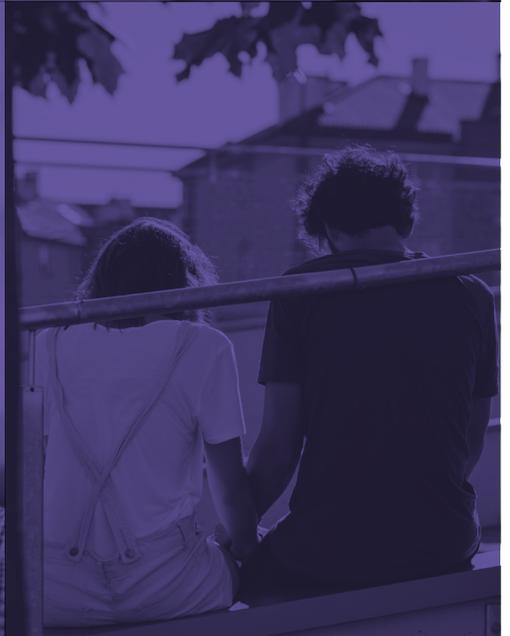
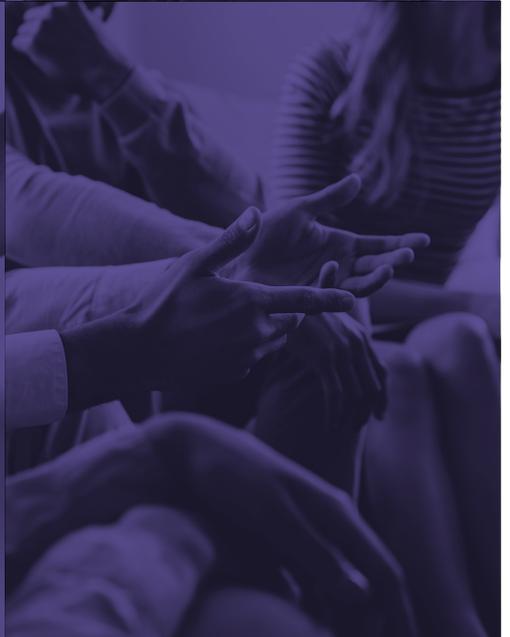
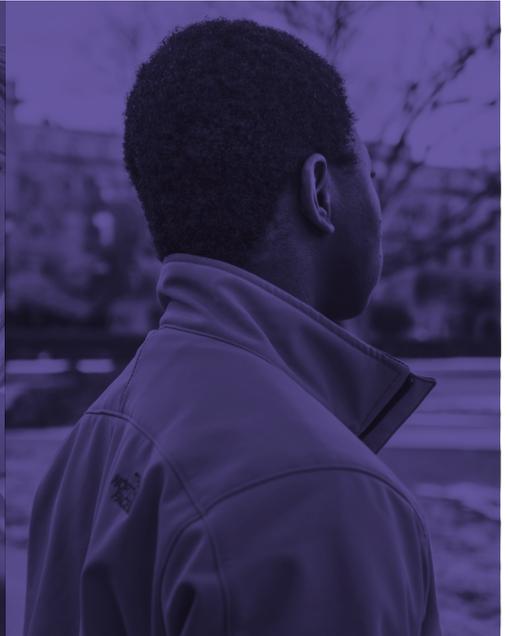


Additional information from the Fatality Review Project is available online.

Visit GeorgiaFatalityReview.com to access recommendations, webinars, past reports, supplemental data, resources and more.

02

Lethality Indicators



One of the key questions Fatality Review Teams (FRTs) sought to answer during the review process was, “What lethality indicators were present in this case?” The answers to this question were uncovered in police reports, court filings and during interviews with the family and friends of the deceased. In nearly every reviewed case, multiple lethality indicators were present.

Unfortunately, due to gaps in information sharing, training and communication among service providers, rarely did anyone who was in a position to help the victim have a complete grasp on the danger the victim was in. Moreover, victims and those closest to them were also not able to connect the dots between the perpetrator’s behaviors and what it meant for the safety of the victim. During interviews, several family members shared with FRTs that, while they knew something was not right, they never imagined their loved one would be killed. Victims who survived their abusers’ attempts to kill them and who were interviewed by the Project indicated a similar sense of their level of danger. While they were scared of what the perpetrator could do, they did not fathom they were in mortal danger — especially at the hands of someone they loved and who professed to love them.

Though all domestic violence cases involve some risk of serious or fatal injury, there are some situations which stand out as more dangerous. Homicide prediction is not an exact science. However, several factors have emerged from research and should be considered benchmarks for increased likelihood of lethal violence.

Georgia is not alone in the study of domestic violence-related deaths. The Project joins 40 other states nationwide whose active FRTs contribute to the study of lethality indicators in abusive relationships (National Domestic Violence Fatality Review Initiative, 2018). Working alongside the research of Jacquelyn Campbell, Evan Stark, T.K. Logan, Neil Websdale and many more, the fatality review process generates data and analyzes trends regarding cases which ended in lethal incidents of abuse. The commonalities within the incidents, also known as lethality indicators, include:

- + history of physical and/or non-physical domestic violence
- + increasing severity or frequency of abusive incidents
- + looming accountability related to criminal charges or civil matters

- + stalking
- + use of strangulation
- + presence of a firearm
- + previous suicide threats or attempts
- + co-occurring depression
- + co-occurring drug or alcohol abuse
- + prior threats to kill, or threats which involve weapons
- + threats to take, harm or kill the victim’s children
- + abuse during pregnancy
- + harm to pets
- + diagnosis of a serious or terminal illness
- + anticipated loss of financial security or job loss
- + possessiveness over victim or severe/morbid jealousy
- + change in relationship status

The wide range of lethality indicators and the ebb-and-flow, in terms of both victim safety and relationship status which accompany abusive intimate relationships, necessitate ongoing safety planning and risk assessment for victims of domestic violence. Steps taken to move away from an abusive relationship should be contemplated and navigated with the assistance of a trained professional who is well-versed in risk assessment and safety planning with victims.

To identify high-risk victims and provide appropriate intervention, professionals conducting risk assessments must consider the comprehensive combination of the victim’s experiences and known risk factors. Given the complexity of the issues in intimate partner violence, generating a list of factors comprehensive enough to encompass all of the issues identified in fatal abuse is nearly impossible. And while we cannot predict what will happen over the course of an abusive relationship nor how it will end, assisting victims in understanding the potential risk their abusive partner poses to their safety is paramount.

HISTORY OF DOMESTIC VIOLENCE

Without question, past behaviors remain the most accurate indicators of future risk. For that reason, a prior history of domestic violence remains a red flag for potential lethality in abusive relationships. Perpetrators are known to employ a wide variety of techniques in their attempts to maintain power and control over victims. When some types of abuse are present in the history of the relationship, there is a higher association with lethal violence.

In 91 percent of cases reviewed by the Project, there was a known history of physical and/or non-physical domestic violence between the victim and perpetrator prior to the fatal incident. National research has yielded similar findings, showing at least two-thirds of women killed by an abusive partner were battered prior to a fatal incident (Campbell, 2017). A perpetrator's use of violence in his past relationships may also be tied to potential risk for current or future victims. In 26 percent of cases reviewed by the Project, the perpetrator was known to have been abusive to at least one prior partner.

Victims in cases reviewed by the Project experienced physical abuse which included being hit or slapped in the face or body, being grabbed by the neck, handcuffed to a bed, kicked, pinned down, having a gun pulled on them or held to their head, having a bullet shot into a surface next to them, having their hair pulled,

being pushed down stairs or into a wall, being spit on, and having their teeth knocked out. In 21 percent of cases reviewed by the Project, the abuser was known to perpetrate sexual violence in the relationship. Documented injuries to victims, as noted in police incident reports, included bruises, cuts and contusions, head injuries, busted lips, bloody noses, broken bones, neck injuries due to strangulation, red marks on shoulders, burning caused by a foreign substance, and stab wounds.

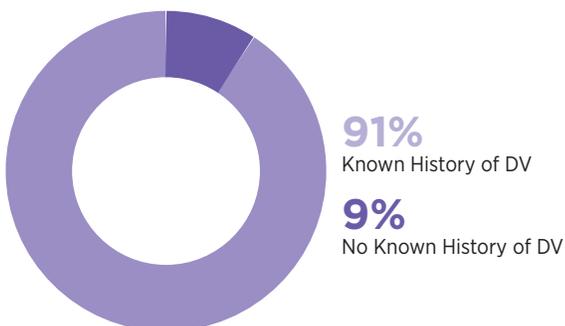
INCREASING SEVERITY OR FREQUENCY OF ABUSIVE INCIDENTS

One of the most commonly identified characteristics for increased risk of lethal violence is an uptick in the frequency or severity of abusive incidents. The shift can be sudden and may be accompanied by an increase in serious injuries to the victim. Perpetrators were known to have inflicted serious injury on their victim in 25 percent of the cases reviewed by the Project.

Often when law enforcement responds to abuse, however, there is no significant physical indicator signaling the severity of violence in the relationship. In 75 percent of reviewed cases there was contact with law enforcement about abuse at some point prior to the homicide, in only 23 percent of those incidents was a visible injury documented when law enforcement responded to a domestic violence incident involving the parties.

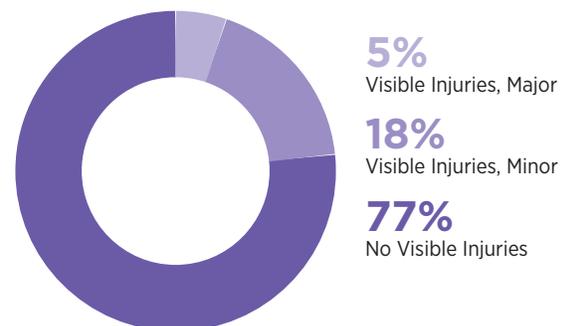
HISTORY OF DOMESTIC VIOLENCE AGAINST VICTIM

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



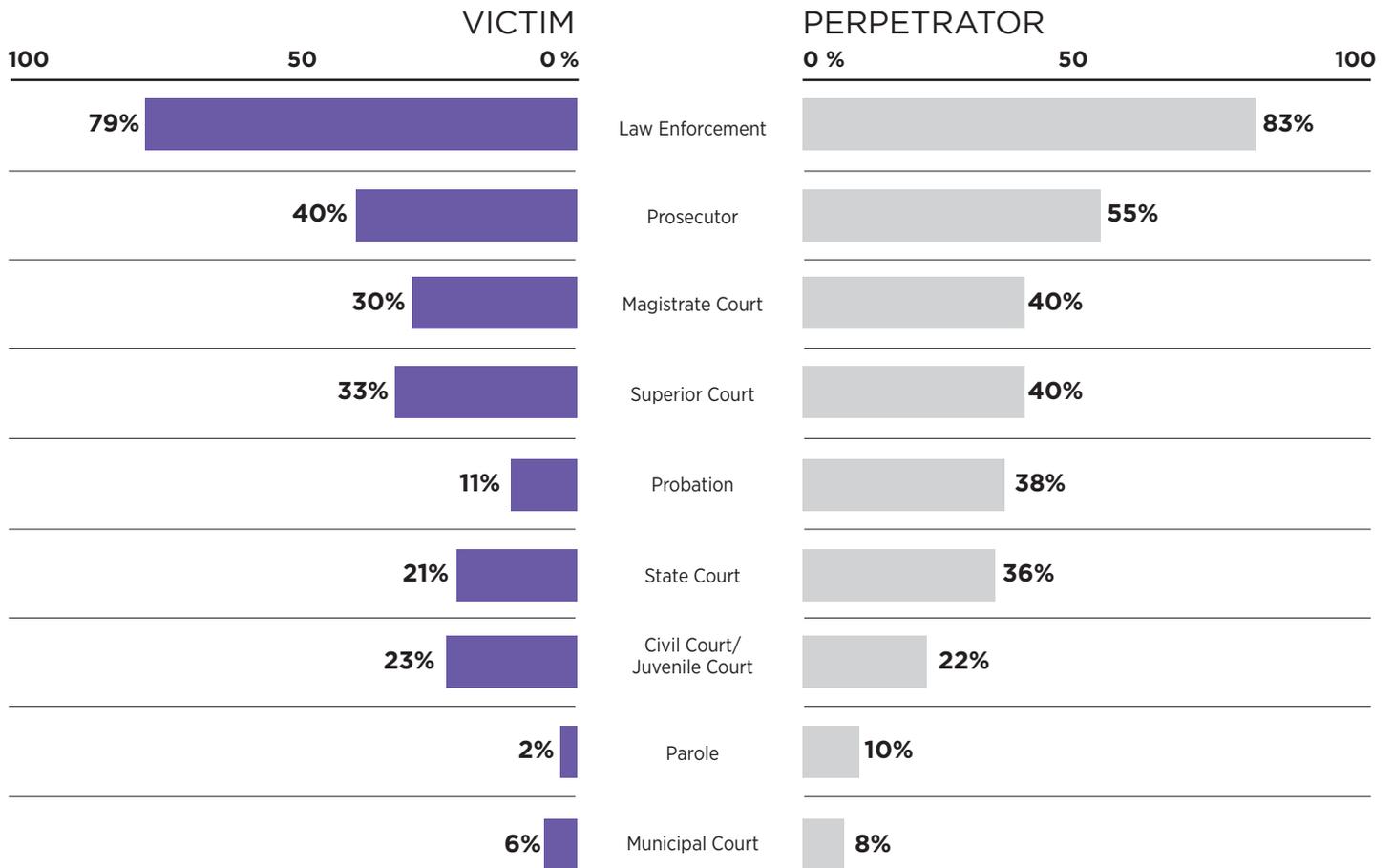
DOCUMENTED INJURIES AT LAW ENFORCEMENT CONTACT

When Law Enforcement Contacted About Abuse in Reviewed Cases (2004–2018)



RATES OF CONTACT WITH CRIMINAL JUSTICE AGENCIES AND COURTS

By Victim and Perpetrator in Reviewed Cases (2004–2018)



LOOMING ACCOUNTABILITY RELATED TO CRIMINAL CHARGES OR CIVIL MATTERS

Often accompanying the increased frequency or severity of abuse within the relationship, increasing contact with civil and criminal justice systems is an indicator of elevated risk of lethal violence. In reviewed cases, a startling 83 percent of perpetrators were in contact with law enforcement officers in the five years leading up to the fatal incident of abuse.

In a national study researching risk of intimate partner homicide, victims of completed or attempted femicide experienced abuse by a partner who had been arrested for domestic violence in 27 percent of cases (Campbell, 2017). Further, 48 percent of perpetrators in reviewed cases were known to have a violent criminal history. Details of police contacts about abuse were known in 69 percent of reviewed cases. In those cases, 254 incidents of abuse were reported, of which 199 calls (78 percent) had known outcomes. Roughly

half of those incidents (98 incidents, 49 percent) resulted in an arrest. For more information on criminal justice outcomes in reviewed cases view related data on page 68.

Both victims and perpetrators in reviewed cases were also likely to have engaged in the civil court system, usually through the Temporary Protective Order (TPO), divorce or child support processes. In reviewed cases, 24 percent of victims had previously obtained a TPO against the perpetrator. Thirteen percent of victims had a TPO in place at the time of the fatal incident. TPOs are a highly useful tool for victims seeking safety from abuse, but the multi-step process of obtaining a TPO may lead to an escalation in threatening or violent behavior by the perpetrator. **It is imperative all victims of domestic violence seeking relief from the courts be referred to a domestic violence advocate who can explore the potential risks associated with filing a TPO, conduct risk assessment and safety planning, and offer additional resources and support.**

STALKING

The term “stalking” most commonly refers to a course of conduct directed at a specific person that would cause a reasonable person to feel fear. This course of conduct, or pattern of behaviors, often includes the following acts by the perpetrator: placing the victim under surveillance; sending unwanted gifts or messages; damaging the victim’s property; making threats to harm the victim, their loved ones, or their property; and harassing the victim privately or in public. Stalking behaviors were known to be present in 58 percent of all cases reviewed by the Project. Our research supports other research nationwide, indicating intimate partner stalkers are the most dangerous type of stalker and stalking is a risk factor for homicide (Mohandie et al., 2006; McFarlane et al., 1999).

Intimate Partner Stalking was the focus of the 2017 Georgia Domestic Violence Fatality Review Project Annual Report. That report covers the tactics used by intimate partner stalkers in-depth and identifies ways to address communities’ response to the issue. The 2017 report can be downloaded from GeorgiaFatalityReview.com/reports/report/2017-report. This issue is also briefly explored on page 40.

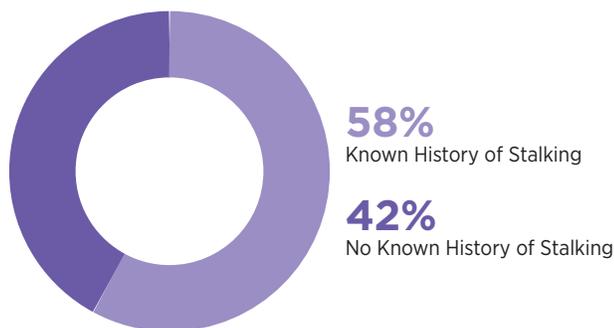
USE OF STRANGULATION

Use of strangulation both indicates an increase in the severity of abuse as well as a higher risk of lethal violence (Campbell, 2017). One study found the likelihood of becoming a homicide victim increased sevenfold for women who had been strangled by their partner (Glass et al., 2008). Non-fatal strangulation assault often leaves no visible injuries. This fact simultaneously reduces the likelihood an abuser will be held accountable for the act, and serves as notice to the victim he is willing and able to kill her.

In circumstances where the victim has been strangled to the point of loss of consciousness on multiple occasions, the lethality risk is substantially higher (Campbell, 2017). Non-fatal strangulation was known to have occurred prior to the lethal incident in 23 percent of cases reviewed by the Project. It should be noted, however, that Project data is primarily sourced from open records of reported abuse by the victim; given this, and considering the victim was deceased and unable to tell us if they had experienced strangulation assault prior to their death, this percentage is likely to be an undercount.

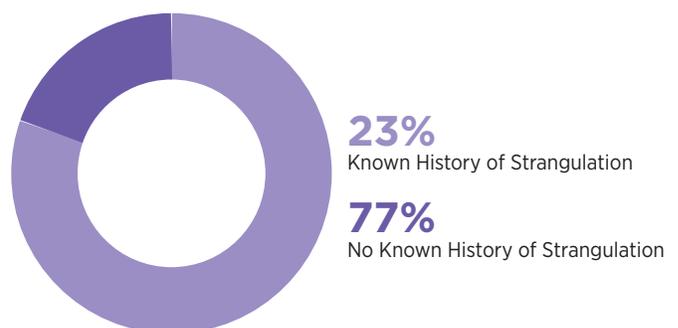
STALKING BEHAVIORS IN THE RELATIONSHIP

Perpetrator’s Known Lethality Indicators in Reviewed Cases (2004–2018)



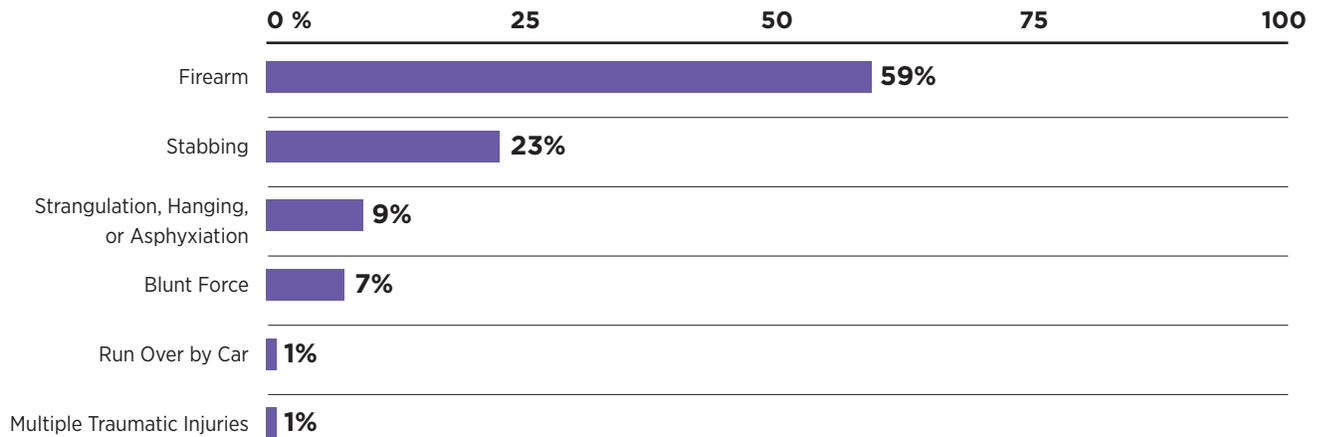
USE OF STRANGULATION

Perpetrator’s Known Lethality Indicators in Reviewed Cases (2004–2018)



VICTIM CAUSE OF DEATH

in Reviewed Cases (2004–2018)



PRESENCE OF A FIREARM

Outnumbering all other means combined, firearms were the leading cause of death for victims in cases reviewed by the Project. The presence of a firearm in domestic violence situations increases the risk of homicide, regardless of who owns the gun. This issue is explored more in depth on page 23.

PREVIOUS SUICIDE THREATS OR ATTEMPTS

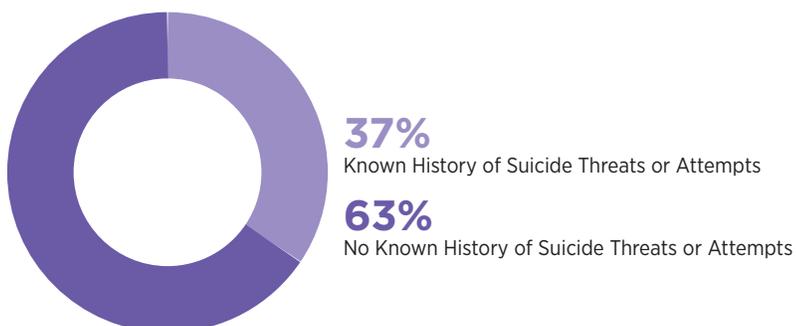
The strong connection between suicide and domestic violence homicide risk is made apparent when evaluating the indicators which overlap both issues. Abusers who are at increased risk of perpetrating a domestic violence-related homicide or murder-suicide often have: symptoms of depression; a history of prior suicide threats or attempts; a history of substance abuse; experiences of a recent medical crisis, financial issues, loss of a loved one, or relationship changes; access to a firearm; and/or looming accountability for their behavior, such as an impending arrest or a court case.

In a national study on the risk of intimate partner homicide, female victims who were killed experienced abuse by a male partner who had threatened or attempted suicide 39 percent of the time (Campbell, 2017). Georgia research yields identical data: 39 percent of the Project's reviewed cases are classified as attempted or completed murder-suicides. Further demonstrating the risk a suicide crisis poses to victims of intimate partner violence, perpetrators in Project-reviewed cases were known to have known to have threatened or attempted suicide prior to the fatal incident in 37 percent of cases.

The homicide-suicide connection was the focus of the 2016 Georgia Domestic Violence Fatality Review Project Annual Report. This report includes information and recommendations for how to address the intersection of suicide and domestic violence to reduce the likelihood of a murder-suicide incident. The 2016 Annual Report can be downloaded from GeorgiaFatalityReview.com/reports/report/2016-report. This issue is also explored on page 37.

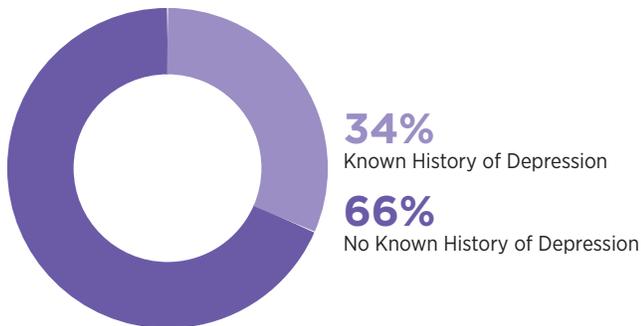
SUICIDE THREATS OR ATTEMPTS BY PERPETRATOR

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



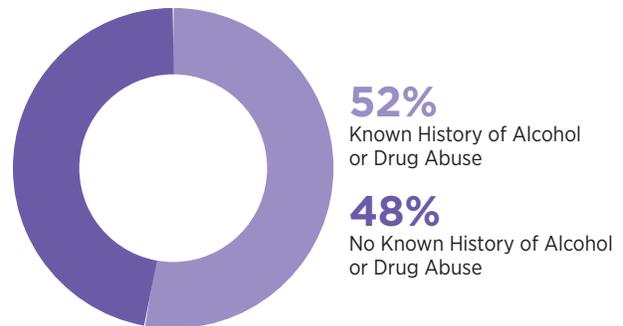
PERPETRATOR'S HISTORY OF DEPRESSION

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



PERPETRATOR'S HISTORY OF ALCOHOL OR DRUG ABUSE

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



CO-OCCURRING DEPRESSION

Though not all depressed people will experience a suicide crisis, the two are often linked. In 34 percent of cases reviewed by the Project, the perpetrator was known to be depressed prior to the fatal incident. Like with many of the lethality indicators, there is help for abusers experiencing symptoms of depression which could mitigate the risk of a lethal incident. Sadly, perpetrators in reviewed cases were known to be in contact with a mental health provider sometime in the five years prior to the lethal incident in only 24 percent of cases.

CO-OCCURRING DRUG OR ALCOHOL ABUSE

Substance abuse issues are often mistaken as the root of intimate partner violence, but we must be clear: Substance abuse and domestic violence often coexist in relationships, but substance abuse is not the cause of abuse. Many individuals who abuse substances never abuse their partner and, conversely, many who abuse their partner never abuse alcohol or drugs.

The cause of abuse is rooted in power and control, not the use of alcohol or drugs, but substance abuse is connected to increased risk of lethal violence. Alcohol and drug abuse were present in 52 percent of the Project's cases prior to the fatal incident and Project data falls closely in line with other research. In a national study on the risk of intimate partner homicide, victims of completed or attempted femicide experienced abuse by a partner who was drunk every day in 42 percent of cases (Campbell, 2017). Increased alcohol abuse may also be part of an overall deterioration of the perpetrator's personal circumstances including neglect of hygiene, depression, lack of sleep and job loss. Any combination of these factors is a cause for concern for victim safety.

Just as with depression, there is help for perpetrators who abuse drugs and alcohol. Although just 7 percent of perpetrators in reviewed cases were known to be in contact with a substance abuse treatment provider in the five years prior to the fatal incident, addressing substance abuse issues in addition to the domestic violence is paramount to reduce risk. This issue is explored more in depth on page 37.

While we cannot predict what will happen over the course of an abusive relationship nor how it will end, **assisting victims in understanding the potential risk their abusive partner poses to their safety is paramount.**



PRIOR THREATS TO KILL OR THREATS WITH WEAPONS

Abusers do not have to use physical force against a victim to be dangerous; threatening to kill the victim, especially with a weapon, can increase lethality. Making threats to kill the victim is a common tactic used by abusers to obtain or maintain power and control in the relationship. This tactic should also be considered a clear indicator of increased risk for potential lethal violence. In incidents reviewed by the Project, perpetrators were known to have made prior threats to kill the victim in 55 percent of circumstances.

Threats to cause harm to the victim using a weapon were also very common, with victims experiencing these threats in 38 percent of cases reviewed by the Project. While firearms pose a particularly significant threat to intimate partners, threats to use weapons of any type should be seen as a risk factor for potentially lethal violence. In cases reviewed by the Project, the perpetrator had previously harmed the victim with a weapon in 12 percent of cases.

THREATS TO/ABUSE OF VICTIM'S CHILDREN

Abusers often do not limit their violence to the intimate partner. Research has indicated it is not uncommon, in cases which

ended in fatal violence, for the abuser to have made threats to take, harm or kill children, as he demonstrated to the victim his willingness to use more severe violence (Zeoli, 2018b). In 45 percent of the Project's cases, the perpetrator and victim shared at least one minor child. Project data also revealed that, while threats to cause harm to a child is an often-used tactic to manipulate or control the victim, in many circumstances the abuser had been known to escalate to child abuse. In 26 percent of reviewed cases, the perpetrator had been abusive to a child prior to the homicide. National research reveals a similar trend with abusers threatening to harm the children in 19 percent of cases studied (Zeoli, 2018b). One study showed perpetrators made threats to harm the children 19 percent of the time (Zeoli, 2018b), and killed children during the incident in 19 percent of intimate partner homicides studied (Campbell, 2017).

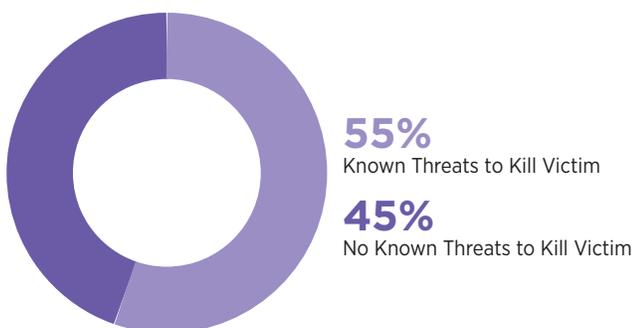
You can read more about the impact of domestic violence on children in the 2015 Georgia Domestic Violence Fatality Review Project Annual Report, available for download at GeorgiaFatalityReview.com.

THREATS TO FAMILY AND FRIENDS OF THE VICTIM

In 12 percent of reviewed cases, someone other than an intimate partner was killed in the fatal incident. This includes children of the intimate partner, new dating partners, family members

THREATS TO KILL VICTIM MADE BY PERPETRATOR

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



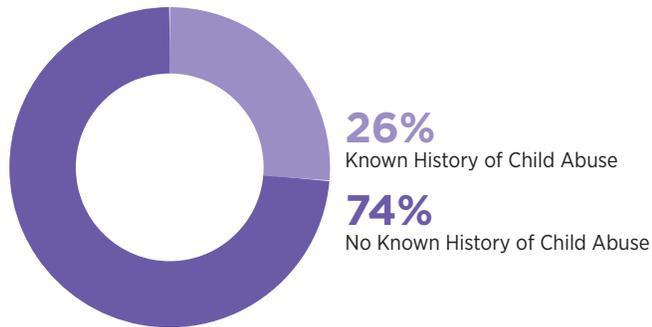
PERPETRATOR MADE THREATS TO HARM VICTIM WITH A WEAPON

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



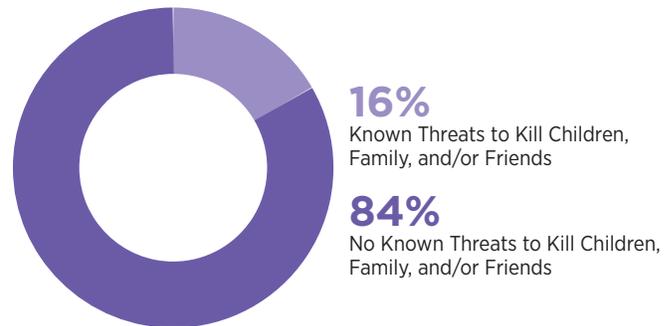
CHILD ABUSE PERPETRATION

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



THREATS TO KILL CHILDREN, FAMILY, AND/OR FRIENDS MADE BY PERPETRATOR

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



and bystanders. Often, children and other people close to the victim are targeted because they are with the intimate partner victim at the time of the fatal attack. Other times, the perpetrator intends to cause additional anguish to the intimate partner victim by harming her loved ones. That said, threats to kill family, friends or children of the victim should be seen as an indicator of potentially lethal violence.

Threats to kill family or friends of the victim were present in 16 percent of reviewed cases. National research reveals even more dire findings, with 34 percent of abusers who perpetrated lethal violence having made threats to kill victims' families prior to the incident (Zeoli, 2018b).

ABUSE DURING PREGNANCY

In a national study on risk of intimate partner homicide, victims of completed or attempted femicide experienced beatings by their partner during pregnancy in 36 percent of cases (Campbell, 2017). The same study found 3 percent of femicide cases involved a victim who was killed while pregnant.

Research on women who died during their pregnancy or first year postpartum found the leading cause of death was homicide and the current or former intimate partner was the perpetrator in 55 percent of those deaths (Campbell, 2017).

Because it is not uncommon for victims at high risk for lethal violence to be abused during their pregnancy, additional screening for abuse and referrals for supportive services for pregnant women are encouraged. Pregnant women are regularly in contact with medical personnel. In fact, studies

show 40–47 percent of homicide victims were in contact with health care professionals in the year prior to their deaths (Campbell, 2017). Routine appointments, such as Special Supplemental Nutrition Program for Women, Infants and Children (WIC) screenings, provide a good point of entry for domestic violence assessments. Six percent of victims in cases reviewed by the Project were receiving WIC just before or at the time of the homicide.

HARM TO PETS

When animals in a home are abused or neglected, it is a warning sign others in the household may not be safe. A correlation between animal abuse and family violence has been well established, with studies identifying 71–85 percent of victims in domestic violence shelters report their abusers also threatened, harmed or killed the family pets (American Humane Association, 2016; Humane Society of the United States, 2008). Indeed, pet abuse is an effective tool batterers use to terrorize victims and keep them silent about their abuse.

Pet abuse — including tactics such as threats or physical harm to a pet, killing pets, deprivation of pets, and financial abuse impeding the obtaining of veterinary care — often functions to discourage victims from leaving the relationship, for fear the abuser will harm or release the pet if they take steps towards independence. Pets were used to manipulate all the victims interviewed for a recent Georgia study, regardless of the abuser's reported affinity for the pet (Johnson, 2018). Concern for a beloved companion animal's welfare prevents or delays 50–100 percent of victims from escaping domestic abuse

(Carlisle-Frank et al., 2004; Johnson, 2018). For victims who flee the relationship, pets left behind may be used as a tool of retaliation against a victim, as a way to coerce her return to the relationship, or as a way to intimidate the victim and children against testifying in court.

While Project data on pet abuse is limited, demand for domestic violence services for Georgia pets is on the rise. Ahimsa House, a Georgia nonprofit organization dedicated to helping human and animal victims of domestic violence reach safety together, has provided more than 84,000 nights of safe shelter for pets in need (M. Rasnick, personal communication, August 17, 2018). During 2017, Ahimsa House saw a 28 percent increase in demand for services over the prior year and received 24 times the number of calls as in 2007, the year the program expanded its reach statewide (Rasnick, 2018). To learn more about services to animal victims of domestic violence in Georgia, visit AhimsaHouse.org.

DIAGNOSIS OF A SERIOUS OR TERMINAL ILLNESS

Loss of physical health is a detriment to the mental health of any person, but for abusers already struggling to maintain a level of control in their family life, the diagnosis of a serious or terminal illness may amp up the risk to an intimate partner victim. The abuser may contemplate the victim's future without him, which may trigger extreme jealousy. He may view the financial circumstances which often accompany a medical crisis as insurmountable, or may experience the onset of depressive symptoms or suicidal ideations, both of which put him in a position of increased risk to himself, the victim and others.

As is the case with victims experiencing abuse during pregnancy, the medical community is uniquely situated to screen domestic violence perpetrators experiencing a medical crisis and connect them with appropriate, supportive crisis and family violence intervention. In cases reviewed by the Project, during the five years leading up to the fatal incident, perpetrators were known to be in contact with a private physician in 19 percent of cases and made contact with a hospital in 20 percent of cases.

ANTICIPATED LOSS OF FINANCIAL SECURITY OR JOB LOSS

The anticipated loss of a person's financial security, often in the form of a job loss, is detrimental to the dynamics of any home. In circumstances where abuse is present, the additional pressures associated with financial hardship can be dangerous. Financial success is a measure of power in American life, and

for abusers who struggle to obtain or maintain power and control in their relationships, loss of financial power may open up additional sources for relationship turmoil. In reviewed cases, 41 percent of perpetrators were employed full-time when they killed the victim. Seven percent were employed part-time and 25 percent of perpetrators were unemployed at the time of the lethal incident. For more information on the employment of perpetrators and victims in reviewed cases, consult the data included on page 62.

Although there are supportive community and government services to assist families experiencing financial crisis, it appears they were underutilized in cases reviewed by the Project. For example, only 8 percent of victims and 3 percent of perpetrators were receiving Temporary Assistance for Needy Families (TANF), also known as food stamps, prior to the lethal incident of abuse.

POSSESSIVENESS OVER VICTIM OR SEVERE/MORBID JEALOUSY

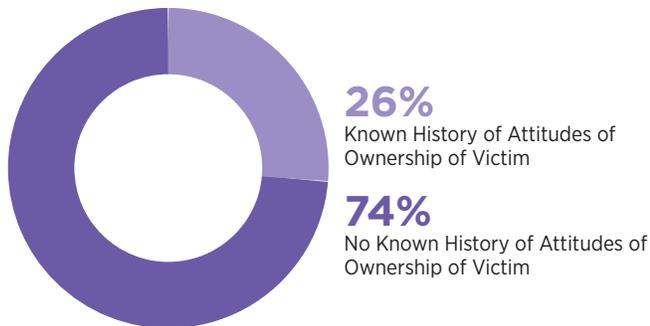
In a national study on risk of intimate partner homicide, victims of completed or attempted femicide experienced abuse by a partner who controlled all of their activities in 60 percent of cases (Campbell, 2017). The same study revealed that of abusers in those cases, 79 percent were violently jealous, making statements such as "If I can't have you, no one can." Georgia's Project data supports the national findings that severe possessiveness of the victim and intense jealousy are precursors to potentially lethal abuse. In cases reviewed by the Project, perpetrators who went on to kill the victim were known to express attitudes of ownership over the victim 26 percent of the time.

Perpetrators of fatal abuse are also known to exhibit what researcher Neil Websdale refers to as "morbid jealousy." Discussed in his book, *Understanding Domestic Homicide*, Websdale's research reveals almost half of male perpetrators of intimate partner homicide displayed obsessive-possessive beliefs about their partners or former partners (Websdale, 1999).

Often growing from the perpetrator's jealousy about the partner's real or perceived affairs with other men, it is not uncommon for an abuser to socially or geographically isolate the victim. In roughly one-third of cases reviewed by the Project, the victim was isolated by the perpetrator prior to the homicide. In more than half of the cases reviewed by the Project, perpetrators were known to have exhibited monitoring and controlling behaviors towards the victim they later killed.

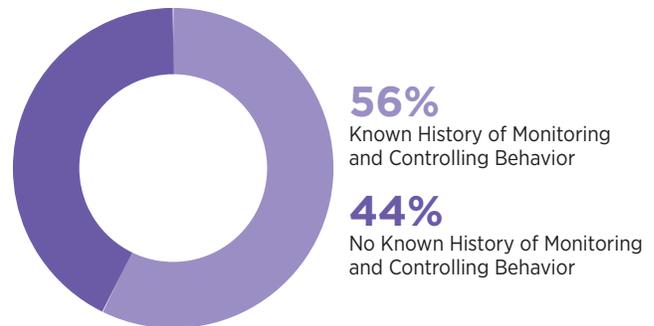
ATTITUDES OF OWNERSHIP OF VICTIM IN RELATIONSHIP

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



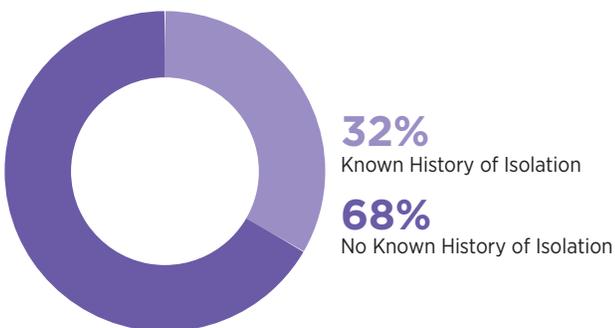
MONITORING AND CONTROLLING BEHAVIOR IN RELATIONSHIP

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



ISOLATION OF THE VICTIM IN RELATIONSHIP

Perpetrator's Known Lethality Indicators in Reviewed Cases (2004–2018)



Monitoring and controlling behaviors are often a part of a pattern of stalking behaviors within the relationship, but also point to unhealthy levels of jealousy or possessiveness which can, in turn, indicate an increased level of fatal risk in an abusive relationship.

CHANGES IN RELATIONSHIP STATUS

Fatality reviews revealed that simply leaving an abusive relationship does not always lead to safety. Despite this, the public discourse around the issue of intimate partner violence often revolves around the question, “Why doesn’t she just leave?” In addition to relaying a sentiment of victim blame, that question fails to account for the serious risk facing victims who

decide to flee an abusive relationship.

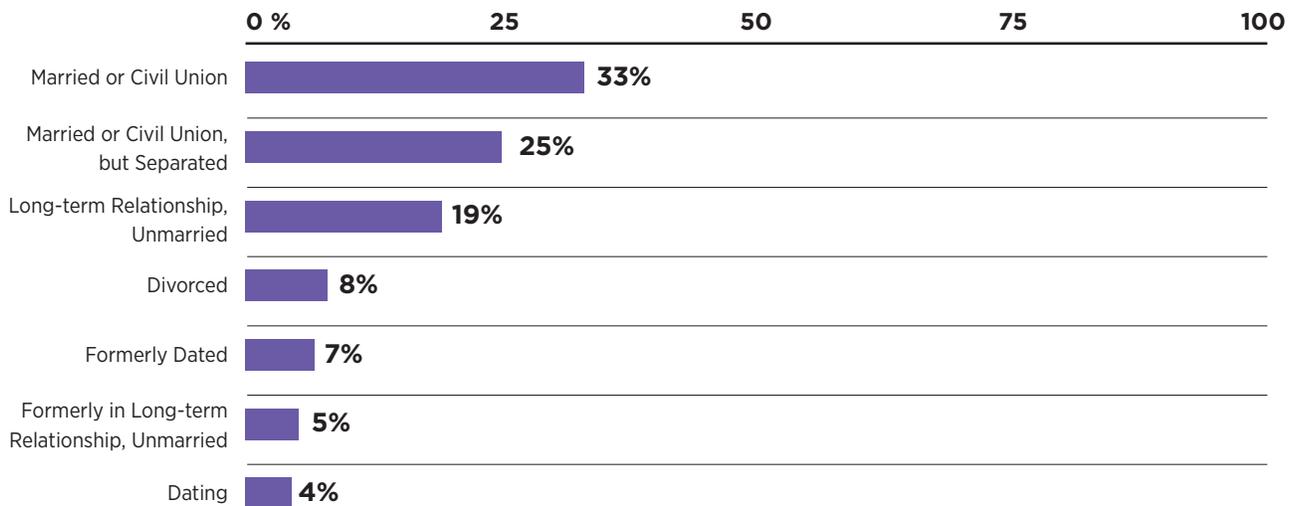
Although studies show victims who leave an abusive relationship do eventually become more safe, statistically speaking, the risk of lethal violence actually increases for victims at the three-month and one-year mark after leaving the relationship (Campbell, 2017). Victims are at the highest risk of being killed by their abusive partners when they separate from them; both rates of, and severity of, physical abuse increase during periods of separation and divorce (Zeoli et al., 2013).

The majority of fatal incidents reviewed by the Project involved current or former intimate partners who were in a long-



RELATIONSHIP STATUS AT THE TIME OF THE FATAL INCIDENT

in Reviewed Cases (2004–2018)



standing relationship. In just under half of reviewed cases, the relationship had ended or the couple had separated. However, this data does not accurately relay the anecdotal information which has been revealed through the fatality review process: that almost all victims were contemplating leaving the relationship or taking steps to do so.

A victim's steps to gain independence may signal to the perpetrator that he is losing control over the victim. Some examples of steps taken by victims in reviewed cases included accepting a new job, increasing social activities, saving money, and changing locks on doors. In some cases, victims had an unspoken desire to leave the relationship and were in the early planning stages of assessing resources and options available to

them. All steps towards independence and separating, even less obvious steps, can trigger an increase in the severity of the abuse.

Understanding the risk factors which signal an increased risk for serious injury or death for domestic violence victims is imperative. Not only does it shape the services and interventions provided for victims and perpetrators, but it can help inform safety plans for victims. Beyond that, communities intent on addressing the problem of domestic violence are most effective when they consider these risk factors as they develop strategic initiatives to combat abuse.

03

10 Key Goals to Improve Domestic Violence Response in Georgia



The following pages detail 10 key goals to improve the response to domestic violence in Georgia. These have been selected based on either the frequency with which the issue was noted in case reviews, or as follow-up to repeated findings identified through the fatality review process or recommendations made by the Project. These goals focus on areas for which Georgia’s response needs improvement and represent opportunities to implement change that will ultimately create safer communities in Georgia.

GOAL 1

Increase Opportunities for Accountability for Batterers

Accountability for individuals who perpetrate abuse in their relationships goes hand-in-hand with efforts to increase safety for victims. Although the two are inherently intertwined, rarely do the priorities for domestic violence response position them with equal importance. In order to properly address the problem, we must gear our outcomes to simultaneously increase accountability and safety.

CRIMINAL LEGAL RESPONSE

Fatality reviews have revealed multiple ways system responses led to missed opportunities to hold abusers accountable for their choices involving the victim and their relationship. Law enforcement received 254 calls about abuse prior to the fatal incident in reviewed cases. Fatality Review Teams located outcomes for only 78 percent of them: Of the 199 known outcomes, no arrest was made in 51 percent of calls. In many cases, the lack of arrest was attributed to the abuser having fled the scene prior to police arrival. These “Gone on Arrival” incidents continue to pose a threat to offender accountability, as does the practice of referring domestic violence victims to seek their own warrants against an abusive partner.

In reviewed cases between 2004 and 2018 in which law enforcement was contacted, 33 percent of victims were advised to apply for their own arrest warrants. Referring the victim to seek their own warrant increases barriers to justice and safety. Because law enforcement often acts as the first point of contact

between the victim and the criminal legal system, officers have a unique opportunity to influence victim safety. It is crucial for law enforcement officers to both make arrests and make effective referrals for victim services on-scene.

Miriam’s Story

Miriam and Dale met when they were in the ninth grade. Dale was physically abusive to Miriam throughout the more than 20 years they were together. Dale stalked her and often humiliated her by locking her outside of the home. As time went by, Dale also became increasingly abusive to the couple’s children.

After an incident in which Dale told their 16-year-old daughter, Natalie, he was going to put her “six feet under,” the police were called about the abuse in the home. The child told officers her father had recently been making her and her mother sleep in the garage at night, when temperatures were below freezing. Dale’s physical abuse was also reported, but no arrest was made.

Months later, Dale was arrested for aggravated assault after attacking Natalie’s boyfriend, beating him with a bat. The police reported the incident to DFCS, but it was unsubstantiated and closed. The District Attorney did not indict the case and Dale’s record was expunged after he attended anger management classes.

On another occasion, Miriam helped a friend move. Unbeknownst to her, Dale followed them as they moved furniture with the assistance of her friend’s family members. Dale confronted the male relatives, shouted obscenities at them and accused Miriam of having an affair. That night he again locked Miriam out of the house and she had to call the police for assistance. Neither an incident report nor an arrest was made.

As Miriam made moves to separate from Dale, his threats grew more severe. She told a friend, “If I stay, he will kill me. If I leave, he will kill me.” Just a week later, Dale shot Miriam multiple times, killing her.

Of the cases where law enforcement was contacted about abuse and an arrest was made, in a majority (79 percent), prosecutors pursued family violence charges. However, of these, a significant number (38 percent) were later dismissed or pleaded down. In 26 percent of cases charged by the prosecutor, charges were later dismissed because the victim was killed prior to adjudication. A majority of cases were either originally charged as a misdemeanor or pleaded down to a misdemeanor. Even though this suggests victims were only dealing with “lower-level” violence, it is obviously important to take misdemeanors seriously and hold abusers accountable before violence escalates.

CIVIL REMEDIES

In reviewed cases, 24 percent of victims had previously obtained a TPO against the perpetrator. Thirteen percent of those victims had a TPO in place at the time of the fatal incident. TPOs can be an important part of a victim’s safety plan. Yet, for some victims, risk increases during the process of obtaining a TPO, during the service of the order to the respondent, and at subsequent court dates. For this reason, rapid enforcement of TPOs in the event of violation is critical to victim safety and perpetrator accountability.

A gap undermining the effectiveness of TPOs is the lack of compliance measures for the abusers who are subject to them. Even though Georgia law requires TPO respondents to complete a Family Violence Intervention Program (FVIP), the provision is not always enforced by the court. When respondents are referred to FVIPs, there is often no follow-up to ensure they have completed the program. Further, there are often no compliance measures concerning firearms surrender. Even when the court has ordered the surrender/removal of firearms, many communities report not having a protocol in place for retrieval, storage and return of firearms once a TPO has expired. The issues presented by firearms access by perpetrators is addressed at length on page 23.

LEGAL OBLIGATIONS SET THE STAGE FOR FUTURE ACCOUNTABILITY

When the criminal and civil legal systems fail to work in ways that amount to swift and certain accountability for perpetrators, the burden is inappropriately placed on victims. Victims with childcare, transportation, or other barriers to accessing the court, may go to extraordinary lengths just to participate in the court process. Moreover, failed court

interventions send the message to both perpetrator and victim that the abuse is not serious and the State will not intervene for her protection. When the victim is made responsible for sanctions and accountability measures, perpetrators are led to believe that only the victim objects to the violence and that she, not the community, is responsible for his punishment.

Overwhelmingly the most common reason batterers attend FVIPs is judicial obligation, either through criminal sentence or a civil TPO. Although perpetrators can self-enroll in a program of their choosing, judicial mandates to complete an FVIP are often what compel perpetrators to enroll.

The Official Code of Georgia Annotated (O.C.G.A.) § 19-13-16 indicates a court, when imposing a protective order against family violence or when sentencing a defendant or revoking a defendant’s probation for an offense involving family violence, in addition to imposing any penalty provided by law, shall order the defendant to participate in an FVIP unless the court determines and states on the record why participation in such a program is not appropriate.

Because FVIP is the primary method to address abuser attitudes towards relationship violence, and judges serve as the primary referral source to the program, it is of paramount importance to promote judicial understanding of the differences in FVIP and other types of supportive or behavioral interventions. The Georgia Domestic Violence Benchbook provides supportive information to the bench, urging compliance with both the law and best practices in family violence intervention.

The Georgia Domestic Violence Benchbook is available for download via the Institute of Continuing Judicial Education at ICJE.uga.edu/domesticviolencebenchbook.html.

FAMILY VIOLENCE INTERVENTION PROGRAMS IN GEORGIA

FVIPs are 24-week programs designed to rehabilitate family violence offenders by holding them accountable and prioritizing victim safety. They play a key role in accountability for perpetrators of domestic violence. As of September 2018, Georgia has 116 certified FVIPs in operation in 41 judicial circuits.

A current list of certified Family Violence Intervention Programs can be found at gcfv.ga.gov.

According to O.C.G.A. § 19-13-10(6), FVIPs are certified by the Georgia Department of Community Supervision (DCS), the home

agency for the Georgia Commission on Family Violence (GCFV). Certification requires facilitators to have specialized training in domestic violence and facilitating FVIP classes. FVIP programs are also required to be engaged in their local coordinated community response to family violence, most typically satisfied through participation in local family violence task force meetings.

Georgia and 42 other states have FVIP standards which differentiate these batterers intervention programs from anger management, substance abuse treatment, conflict resolution and psychotherapy. Anger management programs focus on anger as the impetus for violence (Gottlieb, 1999). In anger management, violence is primarily seen as a reactionary behavior and as a result of a triggering factor. FVIPs, however, are specifically designed to intervene with perpetrators of intimate partner violence. In FVIPs, violence is viewed as learned behavior primarily motivated by the abuser's desire, whether conscious or unconscious, to control the victim (Adams, 2003).

Certified FVIPs are charged with prioritizing both victim safety and participant accountability. Safety features include contact with victims by "victim liaisons." Victim liaisons initiate contact with victims whose abusers are enrolled in the program for the purpose of safety planning and providing referrals to supportive services. Victim liaisons can provide feedback to the victim about her abuser's progress in FVIP and can communicate concerns with the FVIP provider at the victim's request. This contact is important. One study found 25 percent of victims contacted by a victim liaison indicated the contact was their first opportunity to talk about domestic violence, 39 percent said they felt influenced to seek help for themselves, and 25 percent said they felt influenced to end the relationship (Arias et al., 2002).

ABUSER REHABILITATION

Given the current research on the relationship between an abuser's attitude and violence against women, researchers have studied short- and longer-term batterer changes in attitudes and beliefs after having attended a batterers intervention program. One study on the short-term effects of completing a 20-week program showed a shift in attitudes of participants to more liberalized views about sex roles, and decreased feelings of anger, jealousy and depressive symptoms after group treatment (Schmidt et al., 2007). A longer-term study, which made contact with participants up to 2.5 years after they completed a 24-week program, found batterers described their change in attitudes and beliefs as part of a long-term personal growth process towards non-violent interactions and more egalitarian relationships. Their personal growth occurred in three steps: acceptance

of responsibility for abuse, awareness of range of feelings and development of empathy for others, and redefinition of masculinity (Schmidt et al., 2007).

A national study on victim perception about the effectiveness of batterer's intervention coupled with victim contact showed 55 percent of victims believed the program was effective (Arias et al., 2002). An extended follow-up looked at how victims perceived their situations after their batterers had completed FVIP and nearly two-thirds of women reported being "better off" after 15, 30 and 48 months. Eighty-five percent of victims indicated they felt "very safe" and "very unlikely" to be assaulted again at 30 months and 48 months following program treatment, while 12 percent reported they felt "worse off." Importantly these shifts in victim perception should be noted in context of the study's other finding: that 25 percent of perpetrators repeatedly re-assaulted a victim after program completion.

STAKEHOLDERS PLAY EQUAL ROLE IN ADDRESSING ABUSER RECIDIVISM

It is a natural inclination to look to the criminal and civil legal system to solve the problem of domestic violence. Our focus has logically remained there because the vast majority of available funding focuses on services to victims involved in the courts. The focus has also remained on justice system interventions because the legal system has power to impose significant sanctions: incarceration, mandatory batterers intervention, monitoring through probation, restitution and fines. All of these factors have solidified an assumption that the onus for intervening in domestic violence and preventing further injury and death lies with the police and courts.

Fatality reviews revealed the legal system cannot solve this problem alone. While continuing to improve traditional systems of response — police, courts, shelters — it is also important to broaden our understanding of who can stop domestic violence and domestic violence-related homicide. As discussed on page 28, family, friends, coworkers and other community members have a role to play in supporting victims and in holding abusers accountable. These non-traditional systems are particularly important in community-specific accountability which considers the culture of the victim and perpetrator.

An important shift, which must happen in society to end domestic violence, is for men to play a larger role in ending violence against women. Because many abusive men have little respect for female voices and authority, the most powerful messages to counter their abuse and coercion of women will

be delivered by other men. Men who use violence against their intimate partners must be told by other men in their community that violence is not acceptable and will not be tolerated.

Men Stopping Violence has an innovative program called Because We Have Daughters (BWHD), built on the premise that violence against women is not a “women’s issue” but a human issue. In order to engage men in the work to end violence against women, BWHD helps men connect with the perspective of the women in their lives, including their daughters but also friends, sisters, mothers, coworkers and other women the men want to be safe. The program helps men understand what it would be like for their daughters and all women to live fully and freely without fear of violence and develops men’s skills to create safety for the women in their lives.

For more information on the Because We Have Daughters program, visit MenStoppingViolence.org/programs/because-we-have-daughters.

STEPS GEORGIA CAN TAKE TO INCREASE OPPORTUNITIES FOR ACCOUNTABILITY OF BATTERERS:

- + **Ensure law enforcement officers have the resources, training and information they need to respond to domestic violence calls.** Because officers are often the first point of contact victims will have with “the system,” how their case is handled often sets the tone for future requests for assistance or intervention by victims. Ensuring officers have a dynamic understanding of the problem of domestic violence and how to intervene is vital. Providing any additional resources and support they need to do their job effectively is imperative.
- + **Ensure there are adequate resources to provide FVIP in all areas of the state.** In circumstances where no FVIP program is present, judicial and prosecutorial leadership should encourage local providers or other agencies to apply for certification. Knowledgeable stakeholders have a duty to educate those in positions of influence regarding the difference between FVIP and anger management classes, and encourage policies which require FVIP attendance by abusers.
- + **To comprehensively address the problem, systems responders must assess their unique position to determine how they can impact change.** All stakeholders must take immediate steps to address abusers’ issues of non-compliance with court orders or new incidents of abuse.

GOAL 2

Utilize All Legal Means to Restrict Abuser Access to Firearms

Consistent strides have been made by stakeholders to address the issue of domestic violence in Georgia. But as a state, we have failed to comprehensively address the fundamental issue that would reduce the number of deaths in our communities: abuser access to firearms.

Despite the often convoluted or complex nature of this issue, both best practices and recognized experts in the field view firearms access as the impact issue which, if addressed, would dramatically reduce the rate of domestic violence-related deaths. Individual communities have implemented recommendations to address the issue, but Georgia has failed to meaningfully address firearms access to abusers on a statewide level.

Intimate partner violence and firearms are a deadly combination. From 2010–2017, at least 758 Georgians died by firearm in domestic violence-related incidents. In fact, a gunshot was the cause of death in 73 percent of all known domestic violence-related deaths statewide during that time.

In cases reviewed by the Project since 2004, firearms were also the leading cause of death for victims. Fifty-nine percent of victims in reviewed cases were killed by firearms, outnumbering all other means combined. A chart detailing victims’ cause of death in reviewed cases is available on page 60.

Georgia data is not unique in relaying the significant weight of the firearms problem. In an average month in the United States, 50 women are shot to death by their intimate partners (Everytown for Gun Safety, 2018). **Many more are injured in our country; nearly 1 million women alive today have been shot, or shot at, by an intimate partner** (Everytown for Gun Safety, 2018).

It has also been well established that the use of a firearm to control or intimidate a victim is a common tactic of abuse, even on occasions when there is no pull of the trigger. An abuser simply having access to a firearm can result in a victim being afraid and feeling less safe (Zeoli, 2017; Sorenson & Wiebe, 2004), because the gun “could be used on them at any time” (Zeoli, 2017). In a national study which surveyed 417 women in domestic violence shelters, researchers found roughly 39 percent reported their most recent partner owned a gun during their relationship (Sorenson & Wiebe, 2004). Of those whose partner owned a gun, 67 percent reported the gun made them feel less safe. If the gun was located inside the home, the number of victims who indicated they felt less safe grew to 79 percent.

Feeling less safe is not surprising, when considering that nearly two-thirds of victims whose abuser had a gun in the home reported their partner had used guns to scare, threaten, or harm them (Sorenson & Wiebe, 2004). There is a high correlation between abusers owning a gun and using it to threaten an intimate partner, typically in one of the following ways (Klein, 2006):

- + threatening to shoot the victim
- + cleaning, holding or loading the gun during an argument
- + threatening to shoot a person or pet the victim cares about
- + firing a gun during an argument with the victim

Victims report sight alone can be enough to inspire fear, if the abuser brandishes a firearm or displays the weapon during an argument. Victims indicate their abusers use firearms to gain power over them, including coercing them to do things they do not want to do (Zeoli, 2017). Researchers point out: “An abuser can simply display his gun during an argument or otherwise exhibit the gun in a hostile manner in order to imply a threat, which understandably elicits acquiescence from an intimate, as it often does in a robbery or other criminal act against a stranger” (Zeoli, 2017). Even when no firearm is visible, abusers’ threats to shoot victims are effective. Although a gun is rarely needed to terrorize the victim, they remain a dangerous and effective tool in the batterer’s arsenal.

Domestic violence perpetrators in possession of firearms pose an increased risk not only to intimate partners, but also their families and bystanders. Witnesses, including children, are more likely to be present when guns are involved in a violent incident than when no weapons are involved (Zeoli, 2018b). In 12 percent of cases reviewed by the Project, someone else besides the victim and perpetrator was killed. Seventy-three

percent of those deaths were by firearm. Further demonstrating that this private violence is a public safety issue, an analysis of 156 mass shooter incidents in the United States between 2009 and 2016 revealed 54 percent of mass shootings were related to family violence (Everytown for Gun Safety, 2017). Mass shootings are incidents in which four or more people, not including the shooter, were shot and killed. Tragically, 40 percent of those killed during U.S. mass shooter incidents in that time period were children (Everytown for Gun Safety, 2017). Of the five Georgia mass shooting events included in the study, four incidents involved intimate partners (80 percent) and resulted in 20 deaths.

Many of these mass shooting events are categorized as familicides. These include incidents when a perpetrator kills a victim of domestic violence and one or more of her children; in some cases, other adults were also killed. Between 2013 and 2017, there were 23 incidents of familicide recorded by the Project in Georgia. Those familicide incidents resulted in 56 deaths, including 13 intimate partner victims, 26 minor or adult children of the parties, three extended family members of the victim (including two parents), one friend, one new partner of the victim, and 12 perpetrators.

More information on mass shootings is available in our 2015 Annual Report available at GeorgiaFatalityReview.com/reports/report/2015-report.

Research suggests the risk of homicide increases when a violent intimate partner has access to a firearm (Zeoli, 2017). In her nationally recognized study, researcher Linda Saltzman and her team studied the increased risk of firearms in family violence incidents in Georgia and found firearms-involved assaults were 12 times more likely to result in death than assaults which did not involve firearms (Saltzman et al., 1992).

Similarly, the risk of injury in non-fatal domestic violence is also greater when a violent intimate partner has access to a firearm (Zeoli, 2017), particularly for children. More children are injured during domestic violence incidents which involve guns, than those in which no external weapons are involved (Zeoli, 2018b).

Counter to arguments which advocate firearms for self-protection, the presence of a firearm in domestic violence incidents raises the likelihood of homicide, regardless of who owns the weapon. There is a 500 percent increase in risk of homicide when an abusive intimate partner has access to a

gun (Zeoli, 2017), yet Georgia has done little to address the issue of firearms access.

Keeping guns out of the hands of abusers is essential to protecting victims. The Project’s ongoing finding of firearms as the leading cause of death in reviewed cases underscores our repeated recommendation for use of all legal means possible to remove firearms from the hands of domestic violence abusers.

Kristen’s Story

Kristen’s husband of 15 years, James, began collecting guns before he introduced violence into their relationship. By the time she perceived the abuse she was experiencing in the relationship as “really bad,” James had collected nearly 100 firearms. After James threatened to kill Kristen, she filed for a Temporary Protective Order (TPO). After the hearing, among other relief, James was ordered not to possess any firearms and the local Sheriff’s Office was ordered to take possession of the weapons for safekeeping.

Prior to serving the TPO, the Sheriff’s Office met with Kristen and she informed deputies where the firearms were kept in their home, that James was also known to hide weapons in furniture and his vehicle, and he often carried a firearm on his person. When deputies went to serve the TPO and address property issues with James, he turned over only one firearm, telling them he did not have access to his gun safe.

Kristen later told the Fatality Review Team of the deputy, “She told me she had only got the one gun from him. I told her to look in the desk drawer. I know he has firearms somewhere. I told her to check the truck. She said ‘Ma’am, I cannot do that.’” James did have a firearm in his vehicle and he later used it to shoot Kristen and then himself.

Thankfully, Kristen survived the attack and shared her experiences with a Fatality Review Team, stating if law enforcement had been authorized to search for weapons, rather than rely on James to turn them over, things may have ended differently. “They do not let him leave with the garage door openers, but they let him leave with the handgun he shot me with. It makes no sense.”

The Federal Gun Control Act [U.S.C. § 922(g)(9)] prohibits abusers convicted of misdemeanor crimes of domestic violence from purchasing or possessing firearms. The statute defines a misdemeanor crime of domestic violence as any state, federal or tribal misdemeanor that involves “the use or attempted use

of physical force, or the threatened use of a deadly weapon” [18 U.S.C. § 921(a)(33)(A)]. The crime must have been committed by an offender who at the time of the offense met at least one of these conditions:

- + married or formerly married to the victim
- + parent or guardian of the victim
- + had a child together with the victim
- + lived or formerly lived with the victim
- + was a person “similarly situated” to a spouse, parent or guardian of the victim (National Center on Protection Orders and Full Faith and Credit, 2015)

The passage of the Lautenberg Amendment removed exemptions for police and military personnel and retroactively prohibited those convicted of qualifying misdemeanors from purchasing, possessing or transferring a firearm, greatly increasing the breadth of coverage provided under federal law (Battered Women’s Justice Project, 2016).

Versions of the federal statute are mirrored in 27 states’ codes, but Georgia has failed to add similar provisions to state law. In fact, each state bordering Georgia — Alabama, Tennessee, Florida, North Carolina and South Carolina — has adopted measures to prohibit those convicted of qualifying misdemeanor crimes of domestic violence from possessing a firearm, but Georgia has neglected to take this important step towards supporting victim safety. State officials can only enforce the prohibition if there is a state law mirroring the federal prohibition, leaving many community stakeholders feeling like their hands are tied.

This failure to address firearms access has not only left victims unprotected, but has often left law enforcement vulnerable. A 2018 Department of Justice study of law enforcement line-of-duty fatalities confirmed domestic violence incidents represented the highest number of fatal types of calls for service — accounting for 29 percent of deaths which occurred in the line of duty during 2010–2016 (Breul & Luongo, 2018). One-hundred percent of those line-of-duty deaths were by firearm.

TEMPORARY PROTECTIVE ORDERS AND FIREARMS

In addition to restricting firearms access for abusers convicted of misdemeanor crimes of domestic violence, the Federal Gun Control Act [18 U.S.C. § 922(g)(8)] prohibits abusers currently under qualifying TPOs from purchasing or possessing firearms. As part of the Violent Crime and Law Enforcement Act, it

is unlawful for any person who is subject to a court order, including TPOs, which meet the following criteria to possess a firearm or ammunition:

- + The parties meet a relationship requirement which includes a person:
 - to whom the abuser is married (or was married) at the time the order was issued; or
 - with whom the abuser lived (or previously lived) at the time the order was issued; or
 - with whom the abuser had a child at the time the order was issued; or
 - who was the abuser's child at the time the order was issued
- + the order is issued after a hearing is held and for which there was actual notice and an opportunity to participate;
- + a finding is made that the respondent (abuser, defendant) poses a credible threat to the physical safety of the intimate partner or child; and
- + the order restrains someone from harassing, stalking, or threatening an intimate partner or child, or engaging in conduct that would place an intimate partner in reasonable fear of injury. (Battered Women's Justice Project, 2016; Zeoli, 2018a; National Center on Protection Orders and Full Faith and Credit, 2015)

Federal firearms restrictions require actual notice to the abuser and the right to be heard in court. Georgia's two-part TPO process empowers victims to seek relief from the court without the abuser's knowledge. Although the process minimizes coercion intended to stop the victim from coming forward and provides law enforcement agencies charged with serving the orders a tactical advantage, a lack of state law to supplement the firearms restrictions which come along with the final TPO hearing leaves many victims exposed to additional risk. First hearings for TPOs are conducted *ex parte*, with only one side present; this does not require notification to the abuser or give them an opportunity to be heard, meaning firearms prohibitions may not be enforceable. This gap in protection is compounded by the heightened risk of lethal violence associated with the victim leaving the relationship. **States which have provisions addressing firearms in the Ex Parte TPO have seen a 12 percent reduction in total intimate partner homicide and a 16 percent reduction in firearms-related intimate partner homicides since their prohibitions were enacted** (Zeoli, 2018a).

Georgia statute requires that in order to qualify for a Family Violence TPO, parties must be past or present spouses, persons who are parents of the same child, parents and children, step-parents and step-children, foster parents and foster children, or other persons living or formerly living in the same household (O.C.G.A. § 19-13-1). Dating partners are often left out of the protections offered by a TPO and, as such, are also left out of any firearms prohibitions. Closing this small gap in the type of intimate partner relationships which qualify for TPOs locally, often identified as "the boyfriend loophole," would bridge a significant gap in victim safety.

Six percent of cases reviewed by the Project fell through the boyfriend loophole, as they involved parties who had neither lived together, had children together, nor married. Sixty-seven percent of those victims died by firearm. States which have proactively included dating partners in their protections under a TPO have seen an 11 percent reduction on the total rate of intimate partner homicide, along with a 14 percent reduction in the rate of firearms-related intimate partner homicide (Zeoli, 2018a).

In circumstances wherein the victim is aware they have the right to petition the court to address firearms access, and subsequently include that in their request for relief, Georgia's TPO process does allow some room for firearms access to be addressed. It is within judicial discretion to include relief that prohibits the respondent (abuser) from purchasing or possessing firearms and ammunition. Georgia judges can also order the respondent to turn over his firearms for safekeeping. Sadly, the lack of a judicial obligation to include language which addresses these issues often means it is only the best-trained judges who are aware adding firearms language to the standard TPO forms can be lifesaving.

Amplifying the problem, even in cases where firearms have been addressed from the bench, local law enforcement agencies are often left without the teeth they need to enforce the order. Despite the prevailing knowledge that abusers who choose to violate a TPO are among the most dangerous (Klein, 1996), the criminal act of violation of the order is a misdemeanor. What's worse is that even since the enhancement of the law allowing arrest for violation of a protective order (O.C.G.A. § 16-5-95) in 2013, many communities still address violations as civil issues of contempt. Addressing the violations in civil court allows a maximum incarceration of 20 days for violators, whereas in criminal court a defendant can be sentenced up to 12 months for the same act.

LEGAL RESTRICTIONS HAVE SIGNIFICANT IMPACTS

Without universal requirements or enforcement of firearms restrictions, Georgia stakeholders are often forced to work out piecemeal solutions to address the risks associated with abusers who have access to guns. Few communities have official protocols which address abusers' access to firearms.

There are few Georgia communities which have implemented specific policies and protocols to address firearms removal, but in locations where they have been implemented, much has been achieved.

The DeKalb County State Court's Firearms Reduction Initiative has garnered national attention for its proactive success in reducing offender access to firearms. Under the initiative, probationers convicted of misdemeanor crimes of domestic violence are put on notice of firearms prohibitions and sign a judicial notice, swearing they either do not possess firearms or must surrender their weapons, ammunition and firearms permit to probation officers within 24 hours of adjudication. Offender are not allowed to keep their guns nor sell them. More about DeKalb County's protocol is available in the Project's 2014 Annual Report available at GeorgiaFatalityReview.com/reports/report/2014-report.

Regardless of whether firearms restrictions are codified or community-driven, the impact is significant. The incorporation of firearms restrictions into TPOs is associated with reductions in intimate partner homicide committed with firearms and total rates of intimate partner homicide (Zeoli, 2018a). An analysis of 45 states' data has demonstrated that in large cities, state-level firearms prohibitions when a TPO was in effect yielded a 19 percent reduction on total intimate partner homicide and a 25 percent reduction in intimate partner homicides committed with firearms. Even outside those cities, in states with firearms prohibitions in the TPOs, an 8 percent reduction in all intimate partner homicides and a 9 percent reduction in intimate partner homicides completed with firearms were noted (Zeoli, 2018a). The same study showed states which had mandated firearms relinquishment under a TPO yielded a 13 percent reduction in the rate of firearms-related intimate partner homicides (Zeoli, 2018a).

Similar results were noted when researchers looked at the effect of states' expanding the narrow federal-qualifying definition of "misdemeanor crime of domestic violence" to one which restricts abusers who, regardless of their relationship to the

victim, were convicted of a violent misdemeanor. States which enacted firearms prohibitions for all offenders convicted of violent misdemeanors saw a 24 percent reduction in the intimate partner homicide rate and a 27 percent drop in the rate of firearms-related intimate partner homicide.

Mounting evidence of increased levels of safety for victims, law enforcement and communities as a whole are setting the stage for necessary changes within our state to address the firearms problem. While proactive legislation will address the largest gaps, and a case for legislative action is looming, more must be done to address this issue outside of the Gold Dome as well. Georgia stakeholders must evaluate their own roles in reducing abusers' access to firearms, whether in ensuring relief is included in a court order, educating a victim on the risks of access, storing firearms for at-risk individuals, or developing surrender or safekeeping protocols with others in your community. The severity of the firearms problem in domestic violence cases calls for a multi-faceted response, and each system has much to offer to the solution.

STEPS GEORGIA CAN TAKE TO RESTRICT ABUSER ACCESS TO FIREARMS:

- + **Enact proactive legislation to limit abuser access to firearms.** Georgia has fallen behind our closest neighbors and many other states in efforts to address the public safety issues that abusers with firearms access pose. A concerted effort must be made to enforce federal firearms prohibitions locally and to close existing loopholes which allow dangerous dating partners to fall outside of prohibitions.
- + **Ensure firearms access is restricted for abusers subject to Temporary Protective Orders.** Until Georgia codifies the federal firearms prohibitions into local law, much of the work of reducing abuser access to firearms will be done from the bench. Georgia judges should proactively address firearms access in TPOs and compliance hearings to ensure prohibitions are followed.
- + **Develop countywide protocols to establish how each agency will cooperate to restrict access to firearms by domestic violence offenders and protective order respondents.** Georgia's communities must carry the torch for this important issue until legislative and legal system actions catch up with the risk firearms pose to citizens of our state. Develop a plan to address abuser access with your local task force or coordinated community response.

GOAL 3**Build the Capacity of Bystanders to Support Survivors and Hold Abusers Accountable**

In 15 years of conducting fatality reviews, interviews with people in the victim’s support system — family, friends, coworkers, employers and neighbors — revealed these individuals consistently knew more than service providers about the dynamics of the relationship between the victim and perpetrator, as well as the events which indicated danger leading up to the homicide. Moreover, victims were far more likely to turn to their personal connections for support than they were to reach out to traditional systems, whether they made a direct disclosure of abuse or not.

Fatality review findings consistently demonstrate the important role a victim’s support system plays in her life. Though many victims chose to access help from professional systems, such as the courts, law enforcement or domestic violence programs, they appeared to do so only after they first sought help from family, friends, neighbors or coworkers. In 78 percent of reviewed cases, family and friends knew about a history of abuse in the relationship.

Looking at the varied responses victims received from their support systems when abuse was revealed, there is much work to be done to educate non-traditional responders on how to help address the problem of abuse. Though helpful interventions were observed in case reviews — such as a mother accompanying her daughter to the local domestic violence agency for help and a friend escorting the victim to make an incident report — most opportunities to support the survivor and hold the abuser accountable were missed.

During interviews with friends and family members, there were almost no examples given wherein family members tried to intervene with the perpetrator or held them accountable for

their abuse. In fact, in some circumstances, those interviewed did not recognize the behaviors they were witnessing as domestic violence, nor understand the seriousness of the danger the victim faced — even in circumstances where the perpetrators told others about plans to harm or kill the victim. This lack of response should in no way be attributed to a lack of care or concern for the victim, but rather an inability of untrained persons to evaluate the often-complex nature of abusive relationships and respond in a meaningful, helpful and safe way.

For some bystanders who have been exposed to violence or abuse in their own relationship or family of origin, the task of identifying risk factors in someone else’s relationship is even more difficult. In one reviewed case, the victim was a child witness to domestic violence between her parents. The victim’s parents remained in that abusive relationship, when the victim was killed by her ex-boyfriend. An interview with the victim’s sister revealed the family found it difficult to recognize the severity of the abuse her sister was dealing with, because of the ongoing and long-term abuse between their parents. In other cases, family members struggled to provide ongoing support to victims due to their frustration with the on-again, off-again nature of the relationship between the victim and perpetrator.

Every family member interviewed by the Project indicated they knew something was not right in the relationship, but they never imagined it would end in the murder of their loved one. Family, friends, neighbors and coworkers seemed to truly want to help the victim but did not know what to do. They lacked the information and skills needed to offer support and refer survivors to existing resources, particularly the local domestic violence program. Often, the people closest to the victim did not appear to know a local domestic violence program even existed, let alone be aware of the range of services available.

There were also instances in which domestic violence eroded the victim’s relationship with her support system. In some cases, this involved direct attempts by the perpetrator to isolate the victim from supportive friends and family. Strategies used by perpetrators to undermine her network included preventing

the victim from attending family events, interrupting social interactions with family members, disrupting the victim’s ability to talk to long-distance family over the phone or internet, and occasionally requiring a relocation.

Kate’s Story

Kate met her husband, John, when they were in college and married after graduation. She described him as loving and devoted early in the relationship, but eventually his controlling behaviors grew. John began to notice when Kate talked to other men, especially his friends. John would get extremely angry and jealous if Kate talked with the neighbors or if she spent too much time with friends or family. John forbade Kate from making her weekly Sunday morning phone call to her father, a tradition she had enjoyed her entire adult life. Little by little, Kate noticed John isolating her from her friends and family; he wanted her attention at all times.

She began secretly documenting John’s abuse and gave her friends and family small pieces of the puzzle so they would be able to put the story together if something happened to her. She took photos of her injuries and noted the date and description of what happened. She kept the photos in a safe deposit box. It was emotionally painful and made her physically ill to document what John was doing to her; he was supposed to be the one person to always protect her and her children.

Kate felt hopeless and isolated as John’s abuse grew more severe. She began to think her life was in danger. Kate shared with a Fatality Review Team, “While trying to come up with an escape plan, I made sure a neighbor, my best friend and my sister had each other’s contact information. I also gave my neighbor the extra key to the safe deposit box. I was careful not to give them too much information, as I knew I would be killed if someone confronted him and their life could possibly be in danger as well.”

Kate was not wrong. After learning she had reached out to a shelter, John strangled her and beat her, causing her serious

injuries which required multiple surgeries. Against all odds, Kate survived the attempted homicide. She and her children are now safe from John, who was convicted of abuse and sentenced to life in prison.

It was also not uncommon in reviewed cases for perpetrators to use threats to the victims’ support networks as another tactic to reduce the likelihood they would successfully intervene. Threats to kill the victim’s family members were documented in 16 percent of reviewed cases. Threats such as these are designed to either cause the victim to withdraw from her support system as a way to protect them, or to discourage those offering the support from continuing their interventions.

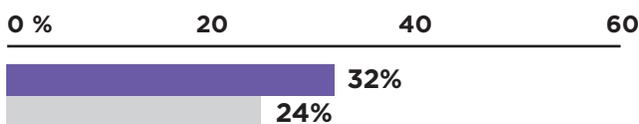
Case reviews show non-traditional responders including family, coworkers and the faith community were vital to many victims’ ability to recognize they were in an unhealthy relationship and maybe in danger. Stories of employers and coworkers providing assistance were common. In one case, the victim’s coworker allowed her to live rent-free while she saved up money to file for divorce from her husband. Another’s boss loaned her a car to get to and from work after her estranged husband disabled her vehicle. At least one victim had reportedly not realized she was in an abusive relationship until her coworker labeled her husband’s stalking and harassment as “not normal” and “wrong.” Other victims were informed of legal options such as TPOs while on the job.

At the time of their death, 77 percent of victims in reviewed cases were employed outside the home. Given the high rate of employment, the workplace provides an ideal location for victims to receive helping information and referrals to resources, because victims can obtain the information while they are out of the presence of their abuser. Companies using best practices routinely offer information to employees about domestic violence resources via company newsletters, websites and lunch-and-learns, and structure flexible benefits and Employee Assistance Programs to provide additional support to employees experiencing or perpetrating abuse.

CONTACT WITH FAITH COMMUNITY

By Victim and Perpetrator in Reviewed Cases (2004–2018)

VICTIM PERPETRATOR



Places of worship provide another ideal location for supportive interventions, given the high rate of contact that both victims and perpetrators in reviewed cases had prior to their deaths. Thirty-two percent of victims and 24 percent of perpetrators were connected to a place of worship in the five years prior to the fatal incident. In some instances, victims sought guidance and counseling from faith leaders prior to the homicide or near-fatal attack, but they did not always disclose the abuse. In some circumstances, it appeared the perpetrator's prominent position in the congregation may have played a role in the victims' decisions whether to disclose within their faith community.

If prepared, leaders or members of these religious organizations might have played an important role in holding those abusers accountable and intervening to support the victims' safety. Faith communities are uniquely positioned to spread awareness to vulnerable victims by discussing domestic violence-related issues and providing information through sermons, newsletters and individual counseling. Best practices for faith communities include developing an organizational plan for responding to abuse within the congregation, prioritizing victim safety and abuser accountability. Helpful interventions by bystanders validate the victim's experience, support her efforts to get safe and connect her to resources.

STEPS GEORGIA CAN TAKE TO BUILD THE CAPACITY OF BYSTANDERS TO SUPPORT DOMESTIC VIOLENCE SURVIVORS AND HOLD ABUSERS ACCOUNTABLE:

- + **Sponsor workplace trainings.** With help from domestic violence experts and their local Chamber of Commerce, employers can develop a plan for addressing domestic violence which makes sense for their company. This plan may include the development of a model domestic violence in the workplace policy such as those found at WorkplacesRespond.org. Request the Domestic Violence in the Workplace Train the Trainer Toolkit at GeorgiaFatalityReview.com.
- + **Provide domestic violence training to faith leaders and engage them in the work to end domestic violence.** "Safe Sacred Space: A Training Guide for Family Violence Task Forces" is available for download at GeorgiaFatalityReview.com and additional information can be obtained at FaithTrustInstitute.org.
- + **Include messaging in public education and outreach efforts directed to family members and friends.** Incorporate tips for how to support a victim, where to call for help, and recognizing signs of escalating danger. Provide supportive resources which assist bystanders in processing helpful ways to support someone close to them experiencing or perpetrating violence, such as a friends and family support group.

GOAL 4

Develop State And Local Strategies to Increase Awareness of Healthy Relationships to Prevent Dating Violence

Relationship violence amongst teens is an extensive problem, often hidden in plain sight. Studies show one in 10 high school students has been purposefully hit, slapped or physically hurt by a boyfriend or girlfriend (Grunbaum et al., 2004), and each year nearly 1.5 million high school students nationwide experience physical abuse from a dating partner (Centers for Disease Control and Prevention, 2006).

One in three girls in the U.S. is a victim of physical, emotional or verbal abuse from a dating partner (Davis, 2008). Young

women ages 16–24 experience the highest rates of abuse, at a rate almost triple the national average (Love Is Respect, 2015).

In addition to the staggering rate at which dating violence is happening, it can start at a very young age and have lifelong impact. Studies have shown violent behavior often begins between the ages of 12 and 18 (Rosado, 2000) and violence in adolescent relationships puts victims at a higher risk for immediate and lifelong issues, including emotional and behavioral problems, substance abuse, eating disorders, risky sexual behavior and further domestic violence (Decker et al., 2005; Silverman et al., 2001; Smith et al., 2017).

According to a national study, 7 percent of women who were victims of rape, physical violence, and/or stalking by an intimate partner during their lifetime, first experienced violence by that partner before the age of 18. Georgia's numbers are slightly above this national estimate at 9 percent

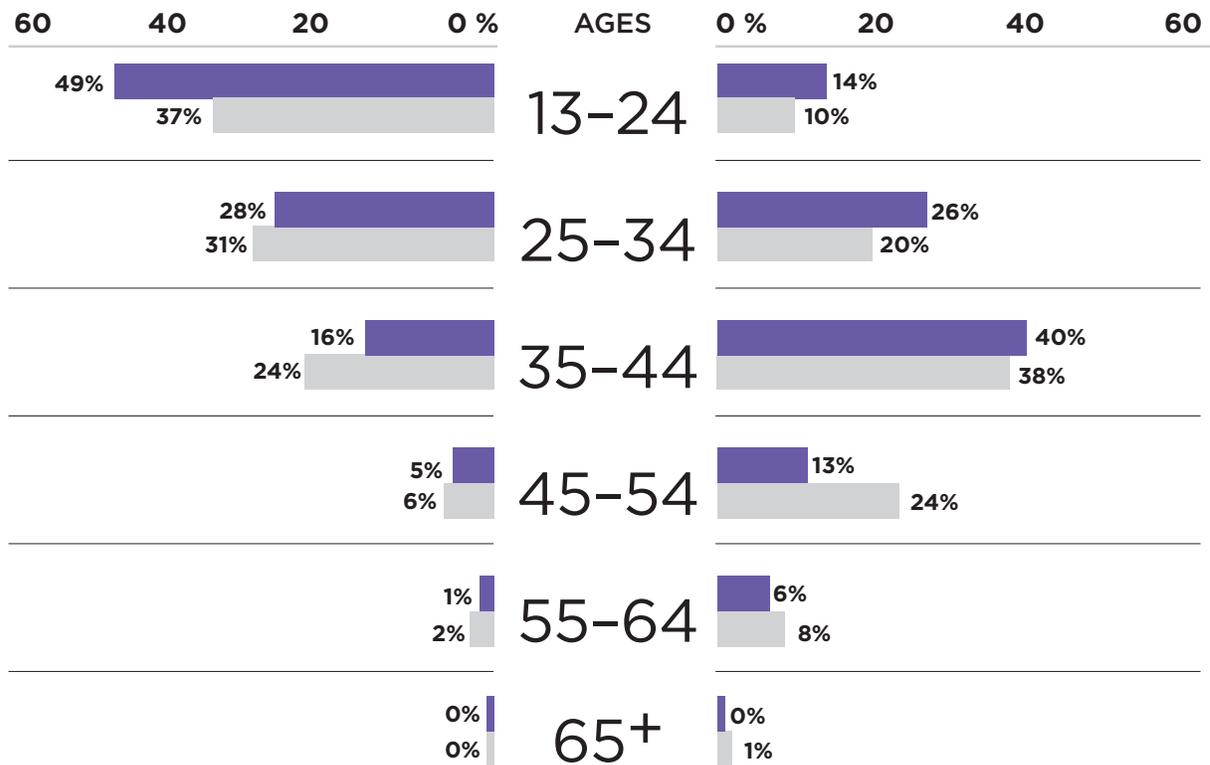
AGE OF VICTIM AND PERPETRATOR IN REVIEWED CASES (2004–2018)

VICTIM

PERPETRATOR

AGE WHEN RELATIONSHIP BEGAN

AGE WHEN HOMICIDE OCCURRED



(Smith et al., 2017). This statistic translates to 336,000 Georgia girls experiencing their first lifetime incident of intimate partner violence prior to age 18. The study did not offer Georgia-specific numbers for male youth who experienced intimate partner violence, but nationally, just under 4 percent, or one in 27 men, reported experiencing intimate partner violence prior to the age of 18 (Smith et al., 2017).

The severity of violence perpetrated by young people is also problematic. In 49 percent of cases reviewed by the Project, victims began their relationship with the person who went on to kill them between the ages of 13 and 24. Thirty-seven percent of the time, perpetrators began the relationship with the victim they went on to kill between ages 13 and 24. These fatal circumstances mirror what national research has also revealed: The severity of intimate partner violence is often greater in cases where the pattern of abuse was established during adolescence (Love is Respect, 2015).

Beth's Story

Beth and Jeremy met at church and began "talking" during youth group. Eventually Jeremy started coming over to Beth's house and they began dating officially. The relationship started well, but went downhill quickly and they began to fight a lot. Jeremy became increasingly controlling of Beth, constantly calling her when they were not together and texting her repeatedly if she did not answer.

Beth began to think Jeremy was cheating and after a few days of fighting, she ended the relationship. After the breakup, Jeremy texted Beth and begged her to come over so they could talk. She went to his house and texted him that she was there. Jeremy met her outside. The talking quickly escalated to fighting and Beth said she was leaving. Jeremy held Beth by her arms and wrists. When she insisted the relationship was over, Jeremy struck Beth with a tire iron and a brick before strangling her with a cord. Beth was 17 at the time of her death, Jeremy was 21.

Despite the prevalence and severity of teen dating violence, those closest to the victim and perpetrator are often left in the dark about the dangerous dynamics of the relationship.

A study of teen victims revealed only 33 percent of those in an abusive relationship ever told anyone about the abuse (Love is Respect, 2015). It is thus not surprising that 81 percent of parents believe dating violence is not an issue, or admit they do not know if it is an issue (Love is Respect, 2015).

Often unnoticed, these dangerous adolescent relationships frequently continue unfettered through young adulthood. One in six college women has been sexually abused in a dating relationship, and nearly half of dating college women experience violent and abusive dating behaviors (Fifth & Pacific Companies, 2010). Sadly, for those college-aged youth experiencing abuse, their peers are no more prepared than their parents to identify or respond to abuse. Fifty-seven percent of college students say abuse is difficult to identify, and 58 percent say they don't know how to help someone who is experiencing it (Fifth & Pacific Companies, 2010). These missed opportunities for early intervention could set victims on a path for future violence and decreased health and well-being which extends into adulthood.

Despite the mounting case in support of dating violence education and intervention, Georgia has done little to address the problem of teen dating violence in any comprehensive manner. Though O.C.G.A. § 20-2-314 requires the State Board of Education to develop a program for preventing teen dating violence for grades 8–12, a requirement for local schools to carry out such a program is notably absent from state requirements, despite the presence of related educational efforts including bullying awareness, sexual education, social responsibility and health. Implementing a healthy relationships curriculum is optional for Georgia's schools, and it appears that little follow-up is done on the statewide level to encourage local educational opportunities on the subject matter.

In contrast to how the issue of dating violence has been handled, and recognizing the vital role Georgia's educators play in the lives of our youth, the Department of Education has responded to some assessments of risky behaviors among Georgia's youth. With recent studies revealing that 8.6 percent of youth in grades 9–12 disclosed least one suicide attempt in the past 12 months (American Foundation for Suicide Prevention, 2018), for example, educators have been mandated to receive training in suicide prevention. These suicide statistics are on par with the rate of intimate partner violence experienced by Georgia's teen girls, who were victims of rape, physical violence, and/or

stalking by an intimate partner at a rate of 8.9 percent, yet no mandate exists for educators on the subject of dating violence awareness or intervention. This must change.

That said, the burden of dating violence identification and intervention cannot be shouldered by school systems alone. Georgia's domestic violence programs are still navigating the best ways to adequately serve young survivors. Many domestic violence programs lack the capacity to address the unique needs and safety concerns of teen victims. Only 20–25 programs statewide are known to have services offered specifically for teens experiencing abusive relationships. And while Georgia's Breaking Silence Teen Textline has been in place since 2012, the number of contacts received annually is nowhere near the number of victims eligible for supportive services. In 2017, the Textline's first year of statewide operation, advocates had 235 conversations with youth which provided support, resources and safety planning (Lisco & Haddon, 2018).

Supplementing the work done in-state, national providers such as Love Is Respect offer services both to teens experiencing violence in their relationships and teen allies. During 2017, Georgia ranked eighth in the nation in terms of contact volume on Love Is Respect's online and telephone channels (Love Is Respect, 2018). During that year, the organization received 757 calls and chats from Georgia and provided crisis intervention, safety planning, referrals to resources, and dating violence education to each caller. Thirty-eight percent of victims in contact for supportive services were ages 19–24 and 18 percent were under the age of 18.

Beyond niche advocacy, Georgia's youngest victims of relationship violence also need enhanced protection under the law. In order to qualify for a TPO, for example, Georgia law requires an adult to petition for a TPO on behalf of a minor victim of intimate partner violence. Even college-aged students, residing on their own and often in locations remote from their families, are still required to have someone age 18 or over assist them in petitioning the court for safety interventions. Although on the surface this request may not seem consequential, for victims under the age of 18 who are afraid or unable to confide in their parent, guardian or other trusted adult, being unable to self-petition for a TPO is an added barrier to safety which may extend the life of an unhealthy or dangerous relationship. That is, assuming they can even meet the relationship qualifications for protections.

Georgia law does not include abuse between dating partners

among those criteria which qualify for a Family Violence TPO unless they have lived together or had children together. Though some teen victims may meet the qualifications for a Stalking TPO, that civil action often leaves Georgia's judges without authority to require young perpetrators to participate in accountability-enhancing and behavior-modifying programs.

As a whole, Georgia is coming up short in our ability to meet the needs of teen victims seeking interventions to abuse, as well as those perpetrating abuse within these age groups.

Ignoring the problem or relying on parents to impress the importance of healthy relationships does not work. Widespread awareness of what constitutes healthy relationships and dating behaviors is needed, along with simultaneous expansion of intervention efforts and supportive services tailored for the growing population of young victims and perpetrators. Acting to prevent violence within the relationships of Georgia's youth is a key step toward reducing violence in adult relationships.

STEPS GEORGIA CAN TAKE TO INCREASE AWARENESS OF HEALTHY RELATIONSHIPS AND TO PREVENT RELATIONSHIP VIOLENCE:

+ **Institute age-appropriate discussions about healthy relationships in Georgia's school curriculum.** Programs are available to teach students to recognize healthy, safe qualities and behaviors in relationships. Many, including the National Coalition Against Domestic Violence's "Take a Stand FOR Healthy Teen Relationships" are designed for in-school use. Visit NCADV.org/teens4healthyrelationships to download the program's materials for students grades 6–12. School personnel including teachers, counselors, School Resource Officers, office staff, coaches and school leadership should also receive training on identifying and responding to relationship violence among students.

+ **Build capacities of domestic violence programs to respond to teens experiencing relationship violence, as well as those who witness violence in their own homes.**

The expansion of teen dating violence prevention programs should include teen-centered interventions for victims experiencing dating violence. Examples include safety planning options specifically for and hosting support groups for victims of teen dating violence and/or teens who have been exposed to domestic violence involving adults in their home. Georgia domestic violence programs interested in expanding services to teens should consider contacting the Georgia Teen Advocate Network (GTAN), a cohort of advocates who are working to implement and improve local teen dating violence awareness and prevention programs and empower youth as allies in their efforts. For more information on joining GTAN, contact the Partnership Against Domestic Violence (404) 870-9600 or Project Safe (706) 549-0922.

+ **Increase awareness of resources available to teens, such as textlines.**

Georgia teens can contact the Breaking Silence Teen Textline any time at (706) 765-8019 for confidential support. Love Is Respect also offers teens a safe place to connect with an advocate via text. Users can text "loveis" to 22522 to receive assistance from a peer advocate.

+ **Expand Georgia law to include civil protections for victims experiencing violence in their dating relationships.**

Georgia lawmakers must recognize the adverse impact the state's current law has on our youngest and most vulnerable victims of relationship violence. The requirement for teen dating violence victims to have an adult petition for TPO relief on their behalf often provides a barrier to safety and justice for victims as well as accountability for abusers. Dating relationships should also be among those qualified for TPOs.

Acting to prevent violence within the relationships of Georgia's youth is a key step toward reducing violence in adult relationships.



GOAL 5**Ensure Victims of Domestic Violence Receive Risk Assessment and Safety Planning at All Points of Contact with Helping Professionals**

During the Project's 15 years of evaluating the coordinated community response to domestic violence and researching known system contacts within reviewed cases, it has consistently been noted that victims are substantially more likely to be in contact with responders other than domestic violence programs. This continues to be a troublesome indicator of the potential lack of comprehensive risk assessment and safety planning conducted with these victims. Only 17 percent of victims in reviewed cases were known to have contact with a domestic violence advocacy program in the five years prior to their death; just 1 percent contacted a sexual assault center.

Typically, advocates from domestic violence and sexual assault programs are among the few service providers with specialized expertise in developing potentially life-saving safety plans. The low percentage of victims who connected with community-based advocates likely means the majority who were later killed by their abusers never had the benefit of safety planning and risk assessment. Sadly, in many reviewed cases, it seemed obvious these interventions could have significantly altered the outcome of the situation.

WHAT IS SAFETY PLANNING?

A safety plan is a tool developed with the victim, which is designed to identify known issues within their relationship and increase their physical and emotional safety. Safety plans can be either formal documents or informal discussions about risk factors and ways to stay safe. Safety plans should consider various scenarios the victim may encounter with their abuser, and should identify plausible steps which can be taken to minimize the likelihood they will be victimized in the future.

While the victim cannot control the abuser's actions, they know their relationship better than anyone else, and are often able to predict stressors or scenarios which may prompt future abuse or contact. Thus, the victim is in the best position to determine points of concern and to plan around them. Safety plans often include steps which can be taken should the victim need to flee abuse or stay safer during an episode of abuse, identify supportive individuals the victim can contact for assistance and support, and incorporate ways the victim can address their emotional needs during times of crisis.

In order for a safety plan to successfully reduce the likelihood of future abusive incidents, it must be:

- + **Victim-centered and survivor-driven.** A successful safety plan must address the issues the victim sees as adversely affecting their safety. The plan must also be designed around the victim's real-life experience and activities. Issues such as the age of the victim, their support network, and the resources they have access to should be considered. Generic safety plans may be useful as an educational tool, but the more tailored a plan is to a victim's life, the more successful it will be in addressing any dangers in their current or former relationship.
- + **Specific.** A great safety plan prompts the victim to evaluate specific steps they can take to reduce future risk of abuse. Identifying the safest location in their home for when violence begins to escalate, where to leave an escape bag, how to safely grow an emergency fund, and determining ways the victim can alter her daily routine to minimize contact with an abuser are specific enough to be rehearsed. The more a victim can mentally rehearse her plan, the more likely it is to be followed.
- + **Practical.** The safety plan must be achievable by the victim with minimal barriers. For example, a plan which includes an expensive security system when the victim is living paycheck-to-paycheck is not practical. That plan will not only be ignored but may deter the victim from seeking assistance in the future if they feel their time was wasted or the plan was not helpful.
- + **Built around risk assessment and lethality indicators.** While educating the victim about potential risks is an important part of preventing future violence, safety planning success hinges on addressing current risk. In order to develop a successful

safety plan, it must be rooted in known risk and should consider any lethality indicators which may be present.

WHEN SHOULD SAFETY PLANNING TAKE PLACE?

Risk is reduced when victims have a personalized, practical plan that includes ways to remain safe while in a relationship, planning to leave, or after leaving. Safety is fluid and can change over time as the circumstances and dynamics of the relationship change. For this reason, safety planning must be an adaptable and ongoing process, not a one-time product.

It is well established that a domestic violence victim is at higher risk for serious injury or death when she is leaving an abusive relationship. In almost all reviewed cases, the victim was either contemplating ending the relationship, making preparations to leave the relationship, or had already taken obvious steps signaling a desire to end the relationship. Because the end of a relationship signals an increased likelihood of lethal violence, safety planning is imperative.

Fatality reviews revealed that in the months and weeks prior to many of the homicides, victims were taking steps indicating an increasing desire to separate from their abusers. Some clear indicators included physically separating from the perpetrator by moving out or “breaking up.” Other victims indicated their intent to terminate the relationship via the court system; a TPO was in effect at the time of the homicide in 13 percent of reviewed cases, and in 14 percent there was a divorce in process at the time of the homicide.

Diane’s Story

Diane and Richard began dating in high school and were together for more than a decade before his escalating physical and emotional abuse caused Diane to decide to break off the relationship. In the weeks leading up to her death, she began to assert her independence from Richard. She increased the amount of time she spent with her friends and her social life flourished. She also purchased a gun for protection and began looking for her own home. Friends and family informed a Fatality Review Team that around the same time, Richard became increasingly paranoid about Diane’s whereabouts. She had to cut time with friends and family short to avoid issues with him. Just a week after Richard was served with divorce papers, he shot Diane multiple times, killing her.

Even if the abuser is not aware the victim has a concrete plan to leave, subtler steps towards separation may have

also been noted. In several reviewed cases, the victims were emotionally separating from their abusers, finding out what local resources existed and talking with people in their support systems about plans to end the relationship. Many victims were taking steps which fostered their ability to gain independence from the perpetrator. Saving money, rejoining the workforce, furthering their education, learning to speak English, reconnecting with their support system, and obtaining their own transportation all provided clues to the abuser they were losing control over the victim.

Because even the inference of relationship changes can create risk to the victim, safety planning must be conducted at all points of contact with victims, by all service providers and systems responders with whom they make contact. Safety planning should also continue with each subsequent contact. Many victims in reviewed cases were navigating very dangerous situations without the benefit of survivor-centered safety planning and risk assessment.

CONSULT A SAFETY PLANNING EXPERT (UNTIL YOU BECOME ONE)

Because leaving an abusive relationship can be a dangerous process requiring planning and preparation, the importance of conducting comprehensive, survivor-centered safety planning at every contact with victims cannot be overstated. As long as victim safety is consistently prioritized, any attempt at safety planning by non-advocates is better than no attempt. Though developing these plans is not rocket science, contacting an advocate for assistance in developing a victim’s plan is encouraged. Even after honing your skills in risk assessment and safety planning, providing a referral to a domestic violence program is among the best ways to assist victims in achieving ongoing safety and support.

Many victims and their support systems are often not aware a domestic violence program exists in their community. Others are not aware of the full range of services these programs provide, and some may not believe they qualify for services. There are several possible reasons for this. Perhaps the victim may:

- + be reluctant to identify as a “victim”
- + believe what she is experiencing is “not bad enough” to be considered abuse
- + think “shelter” is the only service offered and may not want or need it
- + have a criminal history, substance abuse issue, or untreated mental health issue

- + be afraid the abuser will find out they sought assistance
- + have had negative past experiences or a negative perception of receiving assistance
- + have cultural beliefs about relationships and gender roles which create barriers to reaching out for help

Because of the lack of awareness of resources, other agencies and providers often act as a bridge to an advocate. A warm referral to advocacy or safety planning which is conducted in tandem with a domestic violence program by a non-advocate will make a difference in the lives of victims.

There are approximately 65 domestic violence programs in Georgia; 51 of these offer safe shelter. These programs provide their services free of charge. Services are confidential and victims can access services whether they choose to leave their relationship or not. Most domestic violence programs offer services including the following:

- + 24-hour crisis line
- + support groups
- + information/referrals
- + financial assistance
- + legal advocacy
- + child advocacy
- + individual counseling
- + safety planning
- + emergency shelter

You can reach a local domestic violence program by calling 1(800) 33-HAVEN [1 (800) 334-2836]. A list of the state-certified domestic violence programs can also be located at GCADV.org/domestic-violence-centers.

STEPS GEORGIA CAN TAKE TO ENSURE VICTIMS OF DOMESTIC VIOLENCE RECEIVE RISK ASSESSMENT AND SAFETY PLANNING AT ALL POINTS OF CONTACT WITH HELPING PROFESSIONALS:

- + **Secure basic safety planning training for all responders and service providers.** Training on safety planning provides an excellent opportunity to bridge the gap between domestic violence programs and other agencies in contact with victims, and enhances the coordinated community response to intimate partner violence.
- + **Make contact information for domestic violence programs available on a widespread basis in all of Georgia's communities.** Both traditional and non-traditional systems will benefit from referral information for supportive services such as the statewide domestic violence hotline 1 (800) 33-HAVEN [1 (800) 334-2836] and local domestic violence programs. Domestic violence programs and task forces should consider developing materials such as palm cards, resource guides, and other awareness materials which can be distributed in their communities. Posters and other awareness resources are also available for download at GeorgiaFatalityReview.com.
- + **Ensure domestic violence and sexual assault advocates are well versed in safety planning beyond times of acute crisis.** Because risk and safety fluctuate over time, it is necessary that advocates are skilled in safety planning with victims who are both in and out of the relationship. Resources such as Jill Davies' book, *Safety Planning with Battered Women: Complex Lives/Difficult Choices* and her guide for advocates, "Advocacy Beyond Leaving: Helping Battered Women in Contact with Current and Former Partners" provide skill-building reading which will increase safety planning capacities.



GOAL 6**Increase Efforts to Incorporate Awareness of Co-Occurring Issues and Participate in Cross-Training Among Allied Professionals**

Abusive relationships are often compounded by co-occurring issues. Substance abuse or mental health issues complicate already troubled relationship dynamics, often exacerbating existing problems or creating new ones. The presence of these issues can also affect how systems and stakeholders perceive or respond to violence in the relationship. Most notably, substance abuse and mental health issues present additional barriers to safety and accountability for victims and perpetrators, respectively.

One primary problem caused by co-occurring issues is the perpetuation of the myth that substance abuse and mental health issues cause domestic violence. This common misconception leads to false expectations of what needs to happen to end the abuse: “If they would just get off drugs, this would be better” or “If they could only stop drinking, the violence would stop” or “If they would only go back on their meds, they would be able to control their actions.” These commonplace statements are unfortunately misguided because, while substance abuse and mental health issues may exacerbate and contribute to abuse, they do not cause it.

CO-OCCURRING DRUG OR ALCOHOL ABUSE

While the co-occurrence of substance abuse and domestic violence are common, we must recall that one issue does not cause the other. To properly mitigate risk of lethal violence, a perpetrator who is experiencing issues of addiction must be referred to treatment for the substance abuse as well as Family Violence Intervention Program.

One factor consistently associated with intimate partner violence in both adults and adolescents is the use and misuse of alcohol. After numerous research studies, it has become increasingly clear the misuse of alcohol can contribute to the occurrence, frequency and severity of intimate partner

violence. In their report, “Prevention of Intimate Partner Violence in Substance-Using Populations,” J.R. Temple and co-authors indicate that in a large survey representative of the U.S. population, the number of men who physically abused their female partners was three times higher among binge-drinking men compared to their alcohol-abstaining counterparts. Roughly half of domestic violence incidents are reported to co-occur with drinking by the perpetrator, victim, or both. Beyond that, the amount of alcohol consumed has been shown to be positively related to the severity and lethality of the violence — for example, on drinking days, male partners were over four times more likely to perpetrate violence in the relationship and over five times more likely to perpetrate severe violence (Temple et al., 2009).

Drug use is similarly associated with increased rates of domestic violence (Gilchrist & Hegarty, 2017). Use of street drugs such as cocaine and methamphetamine is often implicated in the perpetration of intimate partner violence. Among men diagnosed with a substance use disorder, the yearly prevalence of domestic violence perpetration is found to be between 50–70 percent, with 20–30 percent classified as severe intimate partner violence resulting in injuries (Capezza et al., 2015).

Some researchers note the relationship between substance abuse and intimate partner violence is spurious. That is, the factors which cause or predispose individuals to have problems with alcohol or drug consumption mirror those contributing to both domestic violence perpetration and victimization (Temple et al., 2009). This complicates how systems respond when dual issues are presented. Criminal justice reform has led to a more holistic approach in addressing substance abuse issues; many courts now follow a disease model for intervention, which assumes relapse is chronic and a part of rehabilitation, and factors in genetic and socialized predispositions to abuse substances based on family of origin. As stakeholders continue to adjust the ways we respond to substance-abusing populations, we must be careful not to address domestic violence using the same disease mode. Many individuals who abuse substances never choose to use violence in their relationships, and similarly, many individuals who use power and control in their relationships to abuse their partner never abuse substances. **As we strive for better accountability for perpetrators and safety for victims, we must always remember that partner**

abuse is not a disease, it is a choice; while the issues often co-occur, substance abuse issues are not the root of abuse.

Despite that, the risk of lethal violence posed to victims when substance abuse is mixed with relationship abuse is clear. In a study of intimate partner femicide, perpetrators were known to use street drugs in 55 percent of cases (Campbell, 2017). This rate was considerably higher than the study's known 23 percent of abusers who used street drugs in non-lethal abuse cases, suggesting use of drugs increases the likelihood of lethal violence. The same study suggested similar outcomes when alcohol abuse was present: In cases which ended in death of the female victim, the partner was known to be drunk every day in 42 percent of cases, whereas in non-lethal cases of abuse the perpetrators were drunk on a daily basis in only 12 percent of the circumstances.

In cases reviewed by the Project, 52 percent of perpetrators were known to have alcohol and/or drug issues, but only 7 percent of perpetrators were in touch with a substance abuse program in the five years leading up to the fatal incident. Since perpetrators' substance abuse can increase risk for victims, the fact so few perpetrators were known to have received substance abuse treatment demonstrates a huge gap. Not referring perpetrators to necessary services created missed opportunities to address the co-occurring issues and to reduce the likelihood of a lethal incident of abuse.

Research attributes substance abuse treatment alone to some reduction in rates of intimate partner violence (Capezza et al., 2015). However, many individuals still perpetrate domestic violence following substance abuse treatment. This appears to be particularly true for individuals who relapse, who are three times more likely to perpetrate domestic violence compared to men who remained sober (Capezza et al., 2015). Similar trends are noted amongst participants in batterers intervention programs as well; men with substance abuse issues evidenced greater levels of recidivism for violence in the relationship than did men with no substance abuse issues (Stuart et al., 2009).

CO-OCCURRING MENTAL HEALTH ISSUES

Perhaps there is no better evidence of the highly lethal implications of co-occurring mental health issues with intimate partner violence than the volume of domestic violence murder-suicide incidents which have been studied by the Project. Some 39 percent of cases reviewed by the Project involved perpetrators who, after killing the victim, attempted or completed suicide.

Our findings mirror those established by experts nationwide and point to the presence of suicide threats and attempts as an

indicator for increased risk of lethal violence for a perpetrator's current or former intimate partner. In a national study of cases which ended in the death of a female intimate partner victim, the perpetrator threatened or attempted suicide in 39 percent of cases (Campbell, 2017). In the study, suicide threats and attempts were present at twice the rate as they were in non-lethal abuse cases, where they were present in 19 percent of circumstances studied.

In cases reviewed by the Project, perpetrators were known to have a history of depression 34 percent of the time. Thirty-seven percent of perpetrators were known to have made threats or attempts of suicide prior to the homicide. These factors represent missed opportunities for interventions which may have saved multiple lives. In cases reviewed by the Project, perpetrators were in contact with a mental health provider during the five years prior to the homicide in only 24 percent of cases.

Despite clear connections between threats or attempts of suicide among domestic violence perpetrators and the high rate of murder-suicide incidents, depression and suicidal ideation in domestic violence perpetrators are often overlooked by helping professionals as a serious indicator of danger. It also appears that screening for depression and suicidal ideation in abusers is not routine.

While many factors seem to affect the overlap of these two issues, the most obvious connections exist in the shared indicators of increased risk of suicide and domestic violence lethality. Among the shared indicators are:

- + previous suicide threats or attempts
- + acquisition or presence of a firearm
- + presence of depression and substance abuse
- + medical crisis
- + financial issues
- + impending accountability
- + relationship changes

The homicide-suicide connection in lethal incidents of domestic violence was covered in depth in the Project's 2016 Report, which explores the importance of incorporating suicide-prevention strategies into the work of preventing domestic violence, and vice versa. The Report also lays out strategies for expanding the capacity of service providers who are interfacing with individuals at risk of suicide and domestic violence.

The Project's 2016 Annual Report is available online at GeorgiaFatalityReview.com/reports/report/2016-report.

HIGHER RATES OF MENTAL HEALTH AND SUBSTANCE ABUSE ISSUES AMONG VICTIMS

Linda's Story

Roger already had a long history of abuse towards other women when he and Linda married. She told her friends and family she had not experienced physical violence during the first 10 years of her marriage to him, until Roger pushed her down the stairs. Linda sustained traumatic brain injuries as a result of the incident, which caused changes in her personality and behavior. She began to drink heavily and was arrested for driving under the influence on one occasion.

Linda attempted to get sober, even going through rehabilitative programs on several occasions. Roger was not supportive of Linda's sobriety. He continued to be abusive throughout her efforts, often leaving injuries observed by her family and those who attended her Alcoholics Anonymous groups. Friends of Linda later informed a Fatality Review Team that Roger would often bring home a 12-pack of beer to sabotage her sobriety.

The police were contacted on several occasions about the abuse Linda was experiencing but when they would respond, Roger would appear calm and concerned about Linda, while she appeared frantic and oftentimes was under the influence of alcohol. This dynamic appears to have played a role in a lack of accountability for Roger's violence.

In addition to the increased risk that a perpetrator's co-occurring substance abuse or mental health issues present for victims, these issues often co-occur among victims themselves. Intimate partner violence has consistently been shown to harm women's mental health. Relative to women in non-violent relationships, women in violent relationships are more likely to report anxiety, depression, Post Traumatic Stress Disorder (PTSD) and suicidality (Temple et al., 2009).

Yet in cases reviewed by the Project, there were low rates of contact with helping professionals by victims seeking assistance for potential issues; Only 11 percent of victims were in contact with a mental health provider and 3 percent of victims were in touch with a substance abuse program during the five years leading up to their deaths.

PROFESSIONALS MUST BE CROSS-TRAINED

Given the high likelihood that the problem of intimate partner violence will be commingled with other social and health problems, those charged with responding to domestic violence must be

prepared to address multiple issues. Traditional stakeholders may be trained in the basics of these issues, but the responses are often siloed and only scratch the surface of a complex problem.

The root of the abuse is often falsely attributed to other contributing factors — drinking, drugs, mental stability.

Hope and belief that one issue causes another often influences outcomes in the criminal or civil justice systems which can adversely impact accountability for offenders and safety for victims.

In some cases, the victim influences criminal justice responders not to move a case forward due to her own beliefs the abuse is caused by substance abuse or mental health issues. It was not uncommon in reviewed cases for the victim to have requested the abuser be released on bond, allowed contact, or to have criminal charges dismissed. On the other side of the coin, untrained responders who falsely attribute the abuse to the co-occurring issue may cause the victim to follow suit. Unfortunately, neither of these schools of thought get at the core of the problem; abuse and other issues must both be treated to minimize risk of future violence.

STEPS GEORGIA CAN TAKE TO INCORPORATE AWARENESS OF CO-OCCURRING ISSUES:

- + **Develop integrated intervention responses which address both domestic violence and substance abuse issues simultaneously.** Promising results have been reported for integrated interventions which address domestic violence and substance use simultaneously. There is a push among some researchers and professionals in the field to develop integrated intervention responses which address both issues together to improve outcomes for victims and perpetrators alike (Gilchrist & Hegarty, 2017).
- + **Cross-train professionals responding to domestic violence, substance abuse or mental health incidents.** Because of the high likelihood that their respective populations of clients will experience multiple co-occurring issues, Georgia's professionals should be equipped not only to provide triage to a co-occurring issue outside of their expertise, but also be knowledgeable on the local, state and national resources appropriate to provide additional support alongside their targeted interventions.
- + **Expand awareness that co-occurring issues increase risk of lethal incidents of domestic violence.** Conduct an awareness campaign and continuing education for stakeholders which includes messaging that while other issues co-occur with intimate partner violence, they do not cause it.

GOAL 7**Incorporate Assessments for Stalking Behaviors and Ensure Measures are Taken to Address the Problem**

An estimated 312,000 Georgians are stalked each year (Elliott & Lemeshka, 2017) and based on national research, the majority of stalking behaviors are perpetrated as part of a larger dynamic of domestic violence.

Sixty-two percent of female and 43 percent of male victims of stalking report their stalker was a current or former intimate partner (Smith et al., 2017). Little is known of the extent of the problem of intimate partner stalking in Georgia outside of estimates and anecdotes.

Since 1975, the Georgia Bureau of Investigations (GBI) has acted as the clearinghouse for Georgia-specific data on crimes and crime trends. The GBI administers the Georgia Uniform Crime Reporting (UCR) program, which is part of a nationwide, cooperative statistical effort administered by the Federal Bureau of Investigation. The UCR program collects data on known offenses and persons arrested in our state via the Georgia Crime Information Center (GCIC). GCIC collects information from the monthly crime and arrest reports of more than 600 state and local law-enforcement agencies (Georgia Bureau of Investigation, 2018a). Unfortunately, Georgia lacks a UCR code specific to stalking, thus little data is known about its prevalence within our state. Even after a legislative mandate expanded the family violence-specific data collected by the GBI in 1995, there is a lack of information about the crime of intimate partner stalking.

Georgia still has work to do in terms of understanding the crime of stalking. Perhaps to our detriment, the State's definition of stalking is rather cumbersome. O.C.G.A. § 16-5-90 indicates that a person commits the offense of stalking when he or she follows, places under surveillance, or contacts another person at or about a place or places without the consent of the other person, for the purpose of harassing and intimidating the other person.

Under that law, "contact" is defined as any communication including but not limited to communication in person or by telephone, mail, broadcast, computer, computer network, or any other electronic device. O.C.G.A. § 16-5-90 also defines "harassing and intimidating" as engaging in a knowing and

willful course of conduct directed at a specific person which causes emotional distress by placing such person in reasonable fear for such person's safety or the safety of a member of his or her immediate family, that establishes a pattern of harassing and intimidating behavior, and which serves no legitimate purpose. Importantly, Georgia's law does not require an overt threat of death or bodily injury to be made to meet the threshold of stalking, but it does carve out certain restrictions on the "place or places" the crime of stalking can occur.

O.C.G.A. § 16-5-90 indicates the location where the offense of stalking takes place shall include any public or private property occupied by the victim other than the residence of the defendant. If the victim and stalker have been living in various states of togetherness or separation, as is often the case in an abusive relationship, this caveat can add a level of confusion for responding law enforcement officers attempting to determine what qualifies as the residence of the defendant. The same can be said of the required element of fear, which is often in flux, depending on the day-to-day activities of the current or former relationship of the parties.

While one benefit of Georgia's law is that the behaviors included in the pattern of stalking are non-specific and grouped only as "surveillance" or "contacts," many systems responders in our state lack training to properly identify and appropriately respond to stalking behaviors. What we know of stalking is the breadth of behaviors associated with it go well beyond the stereotypical stranger lurking in the shadows.

Glenda's Story

Glenda had been married to Rick for nearly 20 years by the time she filed a report with law enforcement about his stalking. She had taken many steps to address the problem before then, but her efforts had not curtailed Rick's abusive behaviors. When she filed the report, Rick had added a tracking application to her cell phone. She returned to the police a month later and reported Rick had physically attacked her and told her he was going to get a gun. She also filed a report indicating just nights before, Rick had stalked her, entered her residence while she was asleep, strangled her and sexually assaulted her. The same day, Glenda filed for a Temporary Protective Order (TPO) against Rick.

While the TPO was in place, Rick continued to stalk Glenda. He showed up at events where Glenda was with their children, he repeatedly called her workplace, texted her and sent messages to her coworkers, followed Glenda and confronted her friends about what she had been doing, and posted signs around her neighborhood degrading her. She reported these incidents and Rick was arrested for multiple counts of aggravated stalking.

While incarcerated, Rick began to tell others of his plan to kill Glenda, a plan he followed when he was released from custody, sentenced with credit for time served. Upon his release, Rick again entered Glenda's home without her knowledge, where he shot and killed her.

In fact, the Project's in-depth study of this issue in the 2017 Georgia Domestic Violence Fatality Review Annual Report revealed the tactics utilized by intimate partner stalkers fell into many categories. Building off a framework developed by researchers T.K. Logan and Robert Walker, the 2017 Report categorizes behaviors into stalking strategies including surveillance, life invasion, intimidation and interference through sabotage or attack. The Report also evaluates the presence of electronic stalking behaviors which commonly appear in each of the four strategies.

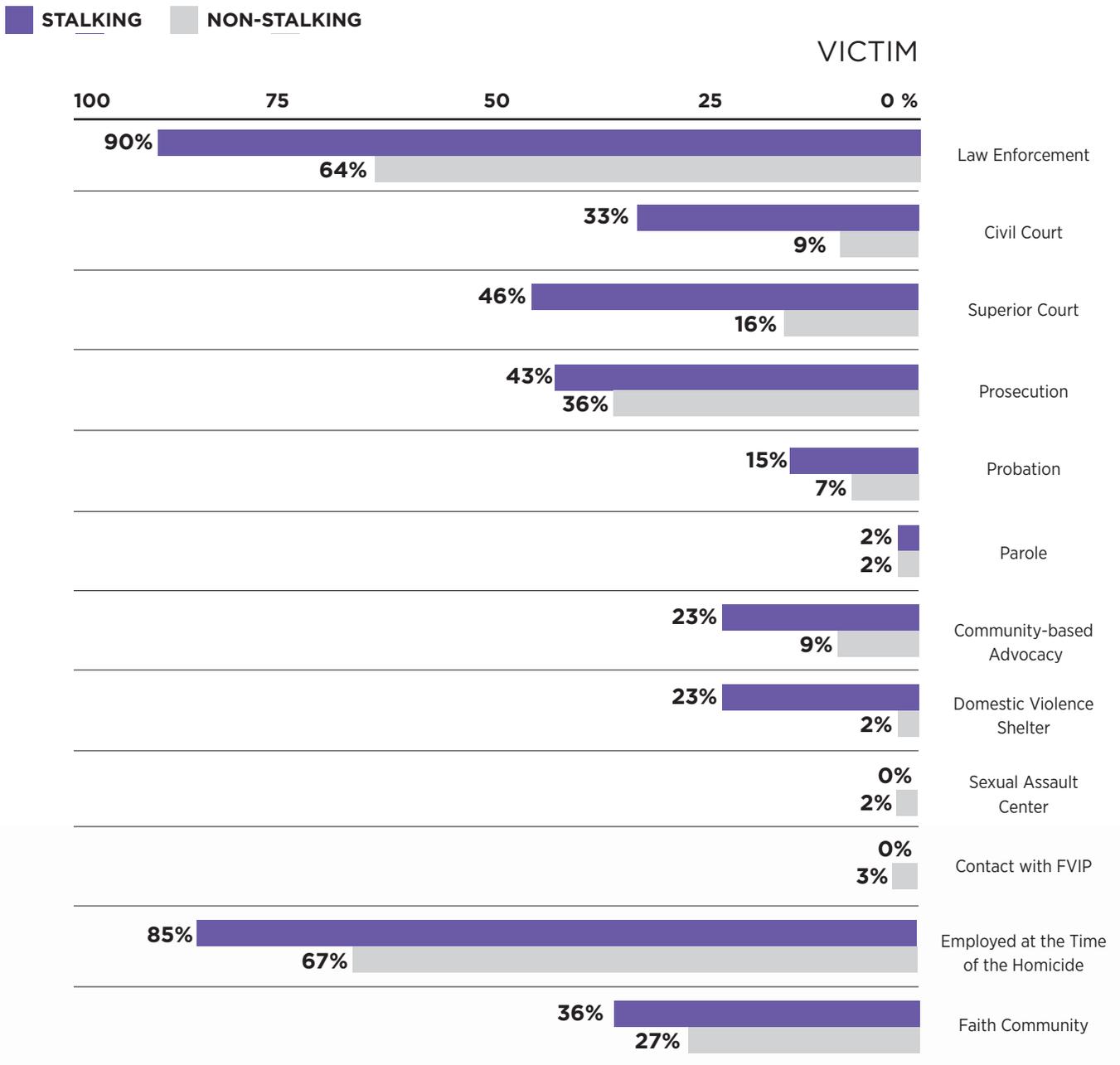
Stalking behaviors were known to be present in 58 percent of all cases reviewed by the Project but, like Georgia's criminal stalking data, there is a lack of information about the rate at which victims of intimate partner stalking contact various responders in non-fatal cases. Data generated by the Project from reviewed cases has yielded surprising findings on the rate at which victims and perpetrators interact with various agencies and responders. In reviewed lethal stalking cases, both victims and perpetrators were more likely than those in non-stalking cases to be engaged with law enforcement, civil and criminal courts, prosecution, probation and parole, victim advocacy programs and FVIPs. Both victims and perpetrators in reviewed cases were also more likely to be employed and involved with their faith community than those not experiencing or perpetrating stalking behaviors. In light of our findings, it is also probable that non-lethal stalking victims and perpetrators are also engaged with these stakeholders at a higher rate. Given this, and considering the knowledge that intimate partner stalkers are the most dangerous type of stalker and stalking is a risk factor for homicide, Georgia must do more to ensure professionals in the field and on the bench are trained on both identifying and intervening in stalking cases.

STEPS GEORGIA CAN TAKE TO INCORPORATE ASSESSMENTS FOR STALKING BEHAVIORS AND ENSURE MEASURES ARE TAKEN TO ADDRESS THE PROBLEM:

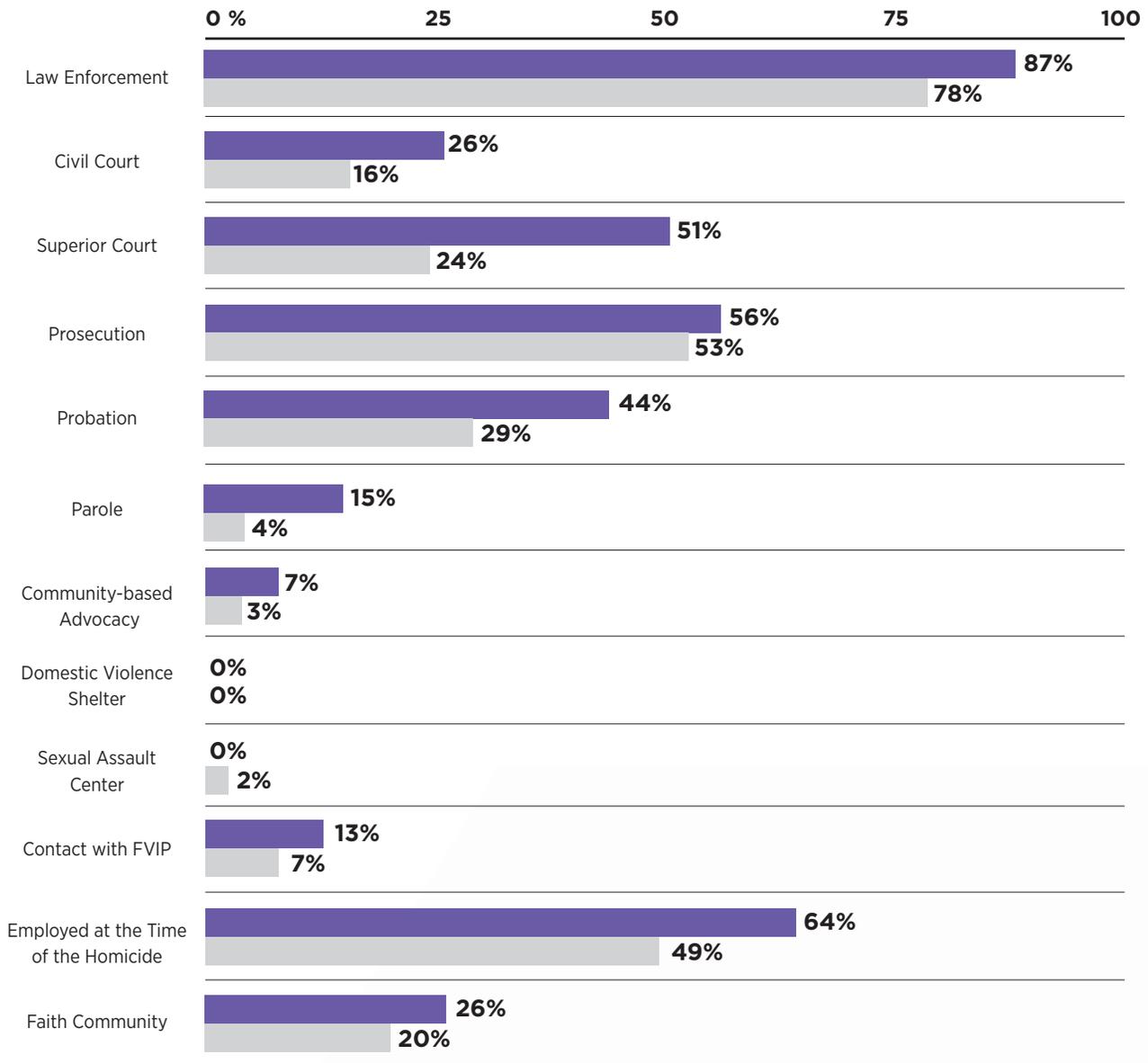
- + **Ensure responders from across the spectrum receive training on the issue of intimate partner stalking.** The training should incorporate both the identification of stalking behaviors and how to respond to intimate partner stalking in accordance with best practices within their field.
- + **Develop or utilize existing screening tools for stalking behaviors which can be implemented at all points of contact with potential victims.** Assessments such as the Stalking and Harassment Assessment and Risk Profile (SHARP) (available free of charge at CoerciveControl.org), Jacquelyn Campbell's Danger Assessment (DangerAssessment.org), or the Ontario Domestic Assault Risk Assessment (ODARA) (odara.waypointcentre.ca) assess the big picture of the stalking situation by examining the course of conduct and provide a framework to educate victims about risks and safety.
- + **Ensure court outcomes for perpetrators of stalking appropriately reflect the severity of the behavior.** Prior intimate partner stalkers are the most likely to recidivate, fail on conditional release, engage in both violent and non-violent re-offenses, and to commit new stalking offenses (Eke et al., 2011). Criminal sentences should be crafted with those findings in mind to enhance accountability for stalking offenders and to minimize the ongoing risk to victims.
- + **Consider legislative change to more comprehensively address the problem of stalking.** Remove the qualification in Georgia's stalking statute which eliminates the offender's residence as a location at which the crime of stalking can occur, so as to allow for increased accountability for intimate partner stalkers acting against someone who also resides or resided in the residence.
- + **Provide referrals to a domestic violence advocate or program for ongoing supportive services and safety planning.** Make brochures and information about local services to victims available to both potential victims and non-traditional responders who may be providing them support.

CONTACT WITH SYSTEMS IN STALKING AND NON-STALKING CASES

By Victim and Perpetrator in Reviewed Cases (2004-2018)



PERPETRATOR



GOAL 8**Provide Supportive Services to Children Exposed to Domestic Violence or Who Lost a Parent to Domestic Violence Homicide**

The Project has identified the impact of exposure to domestic violence and domestic violence-related homicide on children as one of its key findings since 2004. How to best provide resources for, and services to, child witnesses and child survivors of homicide is central to the conversation of addressing the problem of domestic violence.

In 45 percent of reviewed cases, the perpetrator and victim had at least one minor child together. Sharing children can significantly increase victims' barriers to safety, including their decision to leave the relationship, their ability to support themselves and their children away from the abuser, and continued interactions with the abuser regarding custody arrangements. But the presence of children in a home where abuse is present also exposes young victims to traumatic events which may affect them far into their futures.

In 37 percent of cases reviewed by the Project, one or more children witnessed the fatal incident. A child was considered to have witnessed the incident when they had a sensory experience of the homicide; many of the cases involved instances where the child visibly witnessed the homicide or observed the aftermath. Children are also considered to be a witness to the homicide in situations where they overhear the incident.

In another 37 percent of reviewed cases, children were present in the vicinity of the homicide but did not directly witness the crime. In multiple circumstances, children were the first to discover their deceased parent or caregiver, as it was in one case where the victim and the perpetrator were in the process of separating. The victim drove the children to their father's house to collect some belongings. While the children were inside, the mother and father stayed outside to talk. When the children returned to the car, they found their parents deceased in the vehicle, discovering their father had murdered their mother and then completed suicide.

Mari's Story

During the 16 years Jason and Mari were together, she suffered severe abuse at his hands. Jason drank heavily on a regular basis, which seemed to fuel sexual and physical violence. He had a history of punching, kicking and slapping Mari as well as pulling a knife on her. He was also verbally abusive to their two young children.

Eight months before the homicide, Jason's violence against Mari escalated. During one incident, Jason held a gun to Mari's head and accused her of cheating on him. He punched her repeatedly in her body, causing bruising on her arms. Their 3-year-old child started screaming for Jason to stop when he kicked her in the ribs. Jason then grabbed the couple's 12-year-old son, Javier. He held the gun to Javier's head and told Mari he would kill the child if she did not tell him who she was cheating with. This incident led to a judge granting a Temporary Protective Order (TPO) at Mari's request.

Six weeks after the TPO expired, in the early morning hours, Jason hid in the bushes outside the apartment Mari shared with her children and new boyfriend, Jimmy. Jason confronted Jimmy outside the apartment as he returned home from working the night shift. He pointed his gun at him and demanded he open the door to the apartment slowly, without entering. After the door was opened, Jason shot Jimmy repeatedly, killing him. The sound of gunshots awakened Javier, who had been asleep in the living room. Javier saw his father walk past him in the living room and into Mari's bedroom where Jason shot her repeatedly in her sleep. Javier waited quietly until his father fled the apartment and then called the police. Javier later reported being scared his father would come back to the residence and kill him.

EFFECTS OF EXPOSURE TO DOMESTIC VIOLENCE

According to data gathered by the National Domestic Violence Hotline, in 2017, over 50 percent of callers from Georgia noted there were "children involved" in the circumstance for which they were calling (National Domestic Violence Hotline, 2018). Furthermore, the Georgia Bureau of Investigation reports that 106,755 children were present at the scene of family violence calls between 2012 and 2016 (Georgia Bureau of Investigation,

personal communication, May 30, 2018). This is a documented average of 21,351 children per year who witness family violence in their homes. Given that not all law enforcement agencies submit data of this type, not all reports accurately reflect the presence of children on-scene, and not all domestic violence incidents are reported to law enforcement, this staggering number represents an undercount of the extent of the problem of children experiencing violence in their homes.

Children are exposed to domestic violence in the following ways:

- + witnessing abuse by visually seeing violence happening, hearing violence in another room or observing the aftermath of the violence
- + intervening by getting between the abusive caregiver and non-abusive caregiver during an abusive incident
- + intervening to protect and minimize harm to non-abusive caregiver
- + intervening to join in and participate in violence against non-abusive caregiver
- + acting as a confidant when the offending and/or the non-offending caregiver discusses adult content and abuse with child, like they were an adult friend
- + taking on adult responsibilities before, during or following an abusive incident
- + creating a distraction with attempts to call attention to self rather than non-offending caregiver to distract from abuse
- + hiding or remaining out of sight during abusive incident
- + escaping violence by exiting the abusive space (National Child Traumatic Stress Network, 2018)

The effects of children's exposure to domestic violence vary widely. Being subjected to domestic violence in childhood can impact the emotional, behavioral, social and cognitive development of a child to varying degrees, depending on the child's age and developmental level. Infant and toddler witnesses to violence in the home may have more difficulty than infants and toddlers not exposed to trauma, when it comes to completing developmental tasks such as establishing a safe and secure attachment to caregivers, building autonomy, or learning to use fine and gross motor skills. Young children are particularly susceptible to experiencing interruptions in their development due to being highly dependent on the adults around them (Peterson, 2018a). Adolescents exposed to domestic violence are at increased risk for antisocial behavior, school truancy, substance abuse,

running away, involvement in violent or abusive dating relationships, depression, anxiety and social withdrawal (Peterson, 2018b).

LONG-TERM IMPACTS OF EXPOSURE TO DOMESTIC VIOLENCE

The development of programs and resources for children exposed to domestic violence is especially critical to stave off its potential to create long-term effects lasting into adulthood. Such effects are illustrated in the Adverse Childhood Experiences (ACE) Study, one of the largest investigations ever done to examine the links between traumatic childhood experiences and long-term health, well-being and social consequences.

The study revealed that adverse experiences people have as children can impact them over their lifetime, potentially causing greater prevalence of co-occurring physical, mental health and substance abuse conditions such as depression, illicit drug use, alcohol abuse, smoking, suicide attempts, intimate partner violence, sexually transmitted diseases, unintended pregnancy, high-risk sexual activity, fetal death, liver disease, heart disease, obesity, and/or chronic obstructive pulmonary disease (Centers for Disease Control and Prevention, 2018).

For a more in-depth discussion on the impact of trauma on children including an overview of the Adverse Childhood Experiences (ACE) Study, please refer to the 2015 Georgia Domestic Violence Fatality Review Annual Report available for download at GeorgiaFatalityReview.com/reports/report/2015-report.

Information and additional research on the ACE Study is available at cdc.gov/violenceprevention/acestudy.

CHILD SURVIVORS OF DOMESTIC VIOLENCE HOMICIDE

In addition to the trauma of witnessing domestic violence, children who survive a domestic violence-related homicide experience further difficulties. Not only do they lose their victim parent, but they often lose both parents simultaneously when the abusive parent is incarcerated or takes his own life. Children who experience this type of loss grapple with the complicated grief which comes along with losing their parent(s) suddenly and tragically. They may feel angry and confused as they try to comprehend how one parent or caregiver could take the other's life. They may feel conflicted

and confused as they experience anger and blame towards the perpetrator, combined with the love they have for them as a parent. Conversely, they may blame the victim for doing something, or not doing something, to “cause” their own death.

The response of children’s caregivers has an impact on how children deal with their own trauma, therefore it is critical to connect families with helping services. Surviving children are often placed with a family member or friend who is also deeply emotionally affected by the homicide. In many circumstances, the new primary caregivers are the parents of the deceased victim. In addition to their own grief associated with losing their loved one, new caregivers are immediately faced with unexpected tasks and challenges. They must wrap up the affairs of the deceased, including planning and paying for a funeral. They may also be impacted by the stress of the upcoming trial, unexpected emotional and financial child-rearing responsibilities, and the unique parenting challenges of caring for a child exposed to domestic violence and domestic violence-related homicide.

Project interviews with families of the deceased victims revealed most families were still deeply struggling with their grief and the aftermath of the loss, years later. Surviving family members repeatedly disclosed that, in most cases where children witnessed or were present at the time of the homicide, they rarely received specialized trauma interventions, grief counseling, or other necessary wraparound services. New caregivers often cited a lack of financial resources and lack of information about existing resources as barriers to children receiving follow-up services.

That appears particularly true in cases of murder-suicide, after which surviving family members often lack a connection to supportive resources and counseling. This gap is due in part to the fact that, because the perpetrator died by suicide, there is no prosecution and family members do not receive the assistance of Victim Witness Assistance Programs. In many communities, prosecution-based advocates are the primary connection to services such as referrals to counseling and the Georgia Crime Victims’ Compensation Program.

RESILIENCE IN CHILDREN

Against all odds, children are resilient. For a child, resiliency is their ability to recover and adapt from difficult and traumatic events. Resilient child witnesses use safe coping skills to manage stress, grief and trauma.

Fortunately, resilience can be cultivated by concerned adults and supportive peers. Protective factors that promote resilience in children and lessen the negative effects of domestic violence exposure include:

- + having safe relationships with caring, stable, supportive adults
- + access to and support from other surviving family members who share a connection to family culture, bereavement ceremonies and traditional practices (Alisic et al., 2015)
- + access to positive role models
- + receiving effective parenting under stress
- + caregivers receiving emotional and financial support for stability
- + access and use of responsible systems of care (National Child Traumatic Stress Network, 2018)

The impact of domestic violence on children and suggestions to build resilience in them were discussed in depth in the Project’s 2015 Annual Report, which is available at GeorgiaFatalityReview.com. Since that time, two statewide initiatives have been implemented, which address key recommendations regarding children exposed to domestic violence and domestic violence homicide:

During 2017, the Georgia Coalition Against Domestic Violence launched the Child and Youth Project. It focuses on coordinating, facilitating and developing various resources, training opportunities and technical assistance for providers of direct services to child and youth witnesses of domestic violence. The project was founded in response to a 2015 recommendation to develop capacities to respond to cases where children are present at or witness to a domestic violence homicide, or who lose one or both parents to domestic violence homicide. Since 2017, the Child and Youth Project has trained over 200 advocates, clinical therapists and direct-service providers.

In 2017, the Georgia Commission on Family Violence launched the Support for Survivors of Murder-Suicide (SSMS) Project to provide support, resources and referrals to survivors of domestic violence murder-suicide in Georgia. The project was designed in response to fatality review recommendations. Its goal is to develop a statewide outreach program to link surviving family members of homicide victims to the many services they need: financial services, the Georgia Crime Victims Compensation Program, advocacy and case management, grief counseling and parenting support. The SSMS Project also provides training, technical assistance and resources to

communities seeking to strategically develop supports and interventions pertaining to murder-suicide incidents.

During 2018 and 2019, GCADV's Child and Youth Project and GCFV's SSMS Project will partner to facilitate training for domestic violence task forces across the state. The *Healing on Their Time: Understanding the Trauma, Bereavement and Recovery of Child Survivors of Domestic Violence Homicide* training will deepen stakeholders' knowledge and understanding of the impact of domestic violence homicide on surviving children and families and will encourage a coordinated response to support these vulnerable youth.

STEPS GEORGIA CAN TAKE TO PROVIDE SUPPORTIVE SERVICES TO CHILDREN EXPOSED TO DOMESTIC VIOLENCE OR WHO LOST A PARENT TO DOMESTIC VIOLENCE HOMICIDE:

- + **Evaluate community resources available to families who have lost a loved one to homicide, and the process for making families aware of them.** Connecting children who have been exposed to domestic violence and/or survived domestic violence homicide to services is imperative to break the cycle of domestic violence and prepare children to have healthy relationships. Communities should develop protocols for outreach and response to child witnesses
- + **Develop new resources and services which benefit child witnesses.** Proactive responses to children exposed to domestic violence require significant commitment from their community and local service providers. Every system can play a role in assisting children exposed to domestic violence. Family connections, local school boards, teachers, faith-based youth groups, after-school programs, camp counselors and coaches are each positioned to develop resilience in children and to provide warm referrals to existing resources. Every system should promote programs for children and teens which teach coping skills, positive and healthy relationships and how to identify and manage emotions.

In most cases where children witnessed or were present at the time of the homicide, **they rarely received specialized trauma interventions, grief counseling, or other necessary wraparound services.**



GOAL 9**Improve Access to Culturally Relevant Services for Victims from Marginalized Communities**

Victims from historically marginalized and underserved communities face additional barriers when trying to access safety, services and justice. Victims from marginalized communities — including people of color, immigrants and refugees, lesbian, gay, bisexual, transgender and queer (LGBTQ) victims, people with disabilities and Deaf people — often face racial bias, homophobia and discrimination, which influence help-seeking behaviors. Some victims may be reluctant to approach professional systems which often perpetuate the discrimination they have experienced.

Victims from marginalized communities may experience multiple forms of oppression, making for complex situations that professional systems are not always prepared to address. **It is imperative all systems and service providers become more culturally responsive and examine agency policies and practices which may prevent members of underserved populations from accessing services.** Helping professionals must set aside their own biases and beliefs in order to see the totality of a survivor's experience and truly listen to their concerns, beliefs and needs. Only then will our response to survivors truly promote their safety and healing. When resources and services are designed so even the most marginalized victim can access them, services for all victims are improved.

VICTIMS WHO ARE WOMEN OF COLOR

While each community of color brings with it a unique set of cultural considerations, common factors exist among all communities of color which may account for under-reporting of abuse and a reluctance to seek supportive services (Nnawulezi & Sullivan, 2013). Some commonalities include a strong sense of cultural identity which includes loyalty to family and community, along with a reluctance to discuss

“private matters.” In some cultures, it is taboo to reveal abuse and “air dirty laundry,” due to a fear of reinforcing negative stereotypes. For example, Black and African American victims may face ridicule for calling the police on their batterer, essentially turning them over to a criminal justice system with a long history of oppression and abuse against their culture (Gill & Lovelace-Davis, 2016).

A distrust or skepticism of law enforcement and mainstream intervention services such as domestic violence shelters due to racial bias, lack of cultural competency, and past negative experiences are barriers for victims of color (Women of Color Network, 2016). A primary allegiance to community and family can also lead victims to fear rejection from those closest to them if they disclose abuse, isolating the victim from friends, family, congregation and community as a whole. Many women of color describe a “double-bind” of being both subjected to sexism as a woman and racism as a minority or immigrant in the United States (Gill & Lovelace-Davis, 2016).

BLACK AND AFRICAN AMERICAN VICTIMS

Research shows African American women are disproportionately impacted by domestic violence. The National Intimate Partner and Sexual Violence Survey found Black non-Hispanic women and multiracial women were 8 percent and 20 percent, respectively, more likely to have experienced contact sexual violence, physical violence, and/or stalking by an intimate partner in their lifetime, compared to white non-Hispanic women (Smith et al., 2017). Further, an analysis of U.S. homicide data found during 2016, Black females were murdered at more than twice the rate of White females (Violence Policy Center, 2018.) In that study, 58 percent of Black females who knew their offender were killed by a current or former intimate partner (Violence Policy Center, 2018).

Several factors may account for this disparity. Research shows domestic violence is more prevalent among those living with financial insecurity and, according to national figures, twice as many Black men are unemployed as White men (Bureau of Labor Statistics, 2018). One study found women whose male partners experienced two or more periods of unemployment over the five-year study were almost three times as likely to be victims of intimate partner violence as were women whose

partners were in stable jobs (Benson & Fox, 2004). According to a 2017 analysis, 22.5 percent of families living below the poverty line in Georgia are African American (Center for American Progress, 2017). For women of color and their families experiencing higher rates of poverty and lower rates of financial stability, fewer options for safety exist when escaping abuse.

Compounding the lack of resources, the most obvious contributor to the disproportionate impact domestic violence has on Black and African American women is a history of pervasive racism, discrimination and mistreatment and the resulting mistrust of systems (Vann, 2003). Black and African American victims may view traditional domestic violence programs as being part of a system which has historically contributed to their marginalization and oppression (Vann, 2003). Therefore, they may not consider traditional systems as helpful options for addressing abuse.

Despite their skepticism of mainstream systems, Black and African American victims of domestic violence do reach out for help. More than 23,000 African American victims received services from domestic violence agencies in Georgia between July 1, 2017 and June 30, 2018 (Criminal Justice Coordinating Council, personal communication, October 10, 2018). This staggering number accounts for 44 percent of all domestic violence victims served during that year. Furthermore, nearly 50 percent of calls received by the National Domestic Violence Hotline during 2017 were from survivors who identified as Black/African American (National Domestic Violence Hotline, 2018). In fact, Georgia represents the Hotline's seventh-highest rate of contact among all 50 states.

To best meet the needs of Black and African American women who are reaching out for services and support, mainstream domestic violence programs must be culturally responsive. Programs must account for the varied values and life experiences Black and African American victims bring with them. Black and African American victims may be experiencing complex and competing life issues including poverty, generational cycles of abuse, mental illness, or criminal justice system involvement. Domestic violence may not be the most pressing issue they are experiencing at any given time (Vann, 2003). Mainstream domestic violence programs must factor in the complex life experiences of Black and African American victims when designing programmatic responses and policies to successfully provide supportive interventions.

Culturally responsive domestic violence programs will conduct outreach in ways that reach everyone who can benefit from having access to resources, and finding marginalized populations where they gather. For example, Black and African American survivors often turn to their faith community for support. A key part of addressing the spiritual needs of all survivors is to build community relationships and partnerships which increase the capacity of faith communities to identify and intervene in abusive relationships within the context of faith. Furthermore, domestic violence programs should ensure they are supporting the spiritual needs of survivors, regardless of faith tradition, for victims seeking spiritual encouragement as part of their healing process. In cases reviewed by the Project, 33 percent of African American victims were in contact with the faith community during the five years prior to their death.

IMMIGRANT AND REFUGEE VICTIMS

Fatality reviews of cases involving individuals with limited English proficiency identified community-specific barriers including lack of language access for victims who were seeking civil and criminal remedies. Victims and perpetrators were not always able to access critical information in their native language, such as notices of court dates, court pleadings, or TPO forms. Language interpreters also were not utilized on a consistent basis or, too often, untrained interpreters were utilized by responding systems. In many cases, young children were relied on as interpreters for their parents, a factor which often exposes children to adult trauma and reduces the likelihood the victim will accurately report the abuse they have experienced, hoping to spare their child from often-violent details. In reviewed cases, circumstances in which responders failed to utilize language-access services to conduct thorough assessments and interviews led to incomplete investigations of domestic violence crimes and resulted in a lack of criminal accountability for abusers.

Complicating the language barriers, victims or their support systems are often unaware of culturally relevant supportive interventions. Immigrant victims often feel trapped in abusive relationships because of immigration laws, social isolation, and lack of financial resources, in addition to language issues. Fear of deportation, a lack of information on legal rights, and uncertainty about the U.S. court system act as deterrents for victims calling law enforcement. A 2017 national survey was conducted to shed light on how recent immigration enforcement policies impacted immigrant

survivors of domestic violence and sexual assault; the survey found 78 percent of advocates reported immigrant survivors expressed concerns about contacting police. Further, 43 percent of advocates worked with immigrant survivors who dropped civil or criminal actions because they were fearful of repercussions if they continued with their cases (Tahirih Justice Center and Coalition of National Organizations, 2017).

Camila's Story

Camila and Alejandro were introduced by a neighbor in their home country of Mexico. They both relocated to the U.S. separately, where they married and started a family. Alejandro was arrested for abusing Camila three times after they moved to the U.S., once even hitting himself to try to convince the police Camila was the abuser. Camila's grasp of the English language was not strong and interpretation services were lacking. The police typically used a neighbor to speak with her about what had occurred. As the relationship deteriorated, Alejandro began to make threats to end his own life. He repeatedly told Camila he would call immigration and have her deported if she ever left him.

One night at the home, the couple's daughter, Rose, observed Alejandro and Camila arguing and then saw her father put his hand in her mother's face. Rose called the police, but Alejandro was gone by the time they arrived. The child was asked to interpret for her mother, perhaps playing a role in Camila's choice to minimize the incident. She was advised how to obtain a Temporary Protective Order the following week, but never had the chance to file one: Later the same night, Alejandro returned to the home and shot Camila and one of their children before ending his own life. The child survived the incident.

Cultural beliefs and practices of victims and their families create additional barriers not always understood by service providers. Immigrant and refugee victims often live in small, close-knit communities. Relocating can hinder a victim's ability to find safety within their community or to maintain familial and cultural connections. In some cultures, divorce is not accepted or there are cultural consequences such as alienation from one's community should the relationship end. Thus, as with Black and African American survivors, domestic violence programs must make additional efforts to provide culturally competent supportive services and outreach.

Metro Atlanta is home to several organizations providing services to immigrant and refugee victims. These organizations also offer training to task forces and other stakeholders initiating relevant outreach to multicultural communities. For more information on these organizations, visit:

- + *Caminar Latino: CaminarLatino.org*
- + *Center for Pan Asian Community Services: CPACS.org*
- + *Georgia Asylum and Immigration Network (GAIN) (focusing on immigration legal services): GeorgiaAsylum.org*
- + *New American Pathways (focusing on the refugee experience): NewAmericanPathways.org*
- + *Noor Family Services (focusing on Muslim cultures): NoorFamilyServices.org*
- + *Raksha (focusing on South Asian cultures): Raksha.org*
- + *Tapestri (focusing on immigrant and refugee services): Tapestri.org*

PEOPLE WITH DISABILITIES AND DEAF VICTIMS

Another marginalized population which experiences extensive barriers to safety are victims of domestic violence who have disabilities or who are Deaf. Research suggests people with disabilities are more vulnerable to abuse. A national survey on abuse of people with disabilities found 70 percent of respondents with disabilities experienced some form of abuse by an intimate partner, family member, caregiver, acquaintance or stranger (Baladerian et al., 2013). Of those, roughly 50 percent experienced physical abuse. Similarly, research with Deaf and hard of hearing college students indicated a significant association between being deaf or hard of hearing and physical and psychological abuse at the hands of an intimate partner (Porter & Williams, 2011).

Victims of domestic violence who have disabilities may not only be more vulnerable to abuse, but they also face additional barriers to safety and services. Some barriers are a direct result of the abusive tactics used against them, such as: withholding food, medication or medical care; breaking or hiding communication devices and/or adaptive technology; threatening or injuring a victim's service animal; giving the victim drugs without their knowledge, forcing drugs or medications, or giving more or less than was prescribed. Any of these may further impede the victim's ability to access help. If the victim does reach out for assistance after an abusive

incident, it is not uncommon for an abuser to claim the victim's injuries are related to the disability rather than violence.

These factors adversely impact the victim's efforts to evade the abuser's power and control. Victims may fear their claims of abuse will not be believed, either because the abuser told them so, or because of past negative experiences with helping professionals. Victims who are dependent on their abuser for financial support may also lack the economic resources they believe are needed to achieve safety.

In addition to the physical and emotional consequences of the abuse, living with a disability or as a Deaf individual can be isolating. Many survivors' support networks are small and, therefore, victims are less likely to know about available resources. For people with disabilities, their identities are often closely tied with their connections to others with the same or similar disabilities; leaving their community is not an option, regardless of safety. Further contributing to isolation is a reluctance to speak out against someone else from within the community, even when that person is being abusive.

There is also a lack of resources and accommodations for Deaf victims and offenders, and those with disabilities, which often limits their access to service providers and shelters. These issues vary. There may be barriers of physical accessibility to buildings. Information may not be provided in ways those with hearing or sight loss are able to access. In some cases, they may be denied services due to their disability.

When victims with disabilities do reach out, their ability to communicate with helping professionals — such as law enforcement and medical providers — is often limited, as the systems in place to assist them are not prepared to respond in effective and appropriate ways. For example, language and communication barriers are hurdles which leave an enormous gap for Deaf and hard of hearing victims. Having access to certified American Sign Language (ASL) interpreters who can sign, communicate and translate vital information is instrumental to victim safety, but most agencies lack policies and procedures for accessing ASL interpreters or for making other accommodations.

Lack of resources equipped to meet the needs of victims with disabilities leads to re-victimization. In some circumstances where accommodations are lacking, a victim may decide returning to the abusive partner is easier and may or may not reach out for help in the future.

LGBTQ VICTIMS

Research suggests that domestic violence happens at the same rate in lesbian, gay, bisexual, transgender and queer (LGBTQ) relationships, but within the LGBTQ community, domestic violence is vastly underreported or reported as something other than domestic violence, and often goes unacknowledged (Patton, 2007). There are many societal barriers which prevent LGBTQ survivors from reporting abuse including the fact that in many circumstances, such as with employment, housing and public accommodations, they have fewer civil rights protections than non-LGBTQ people.

LGBTQ victims may live in small, close-knit communities with cultural beliefs which do not acknowledge or recognize domestic violence or support victims when they disclose or seek help. Some LGBTQ individuals may believe domestic violence within LGBTQ relationships is "mutual combat." Generally, in the LGBTQ community, there is a lack of understanding and awareness about domestic violence, the resources available to help victims of all sexual orientations and gender identities, and the legal assistance available for LGBTQ victims, including TPOs.

Perhaps one of the chief barriers is the rampant anti-LGBTQ bias existing in our culture. Some victims may fear that airing problems among the LGBTQ population will take away from their collective progress toward equality, or even fuel homophobia. Some victims choose not to call law enforcement for help because doing so could force them to reveal their gender identity or sexual orientation. Others may fear what will happen to their abusive partner if they call the police for help and if their partner subsequently ends up in jail.

The societal bias that exists for LGBTQ-related issues shows up in the responses victims receive when they do reach out for help. Often untrained in cultural sensitivity, service providers may not believe domestic violence occurs in LGBTQ relationships or may lack the knowledge of how to assess domestic violence cases involving people of the same gender. For example, a law enforcement officer may mistake two men living together for roommates rather than romantic partners, leading the incident report to be improperly coded or an arrest to be improperly charged. Officers are most often trained on how to conduct primary aggressor assessments from the typical model of a male partner abusing a female partner; lack of expertise in assessing primary aggressor in same-sex couples could cause an officer to lean towards no

arrest being made or, perhaps even more harmful, the arrest of the victim. This is not a problem unique to law enforcement; responders from multiple systems often misperceive the circumstances of abuse in LGBTQ relationships as mutual combat devoid of the power and control dynamics they more easily recognize in straight couples.

Many LGBTQ victims also have multiple marginalized identities, such as Black/Latinx/Arab, self-identified feminine, or gender non-conforming. Having multiple marginalized identities may intensify the barriers they face. Although the response to LGBTQ victims of domestic violence is gradually improving, there is still a lack of culturally specific services available to them. Mainstream domestic violence programs are rarely designed to be welcoming and inclusive for all survivors. For example, using language that assumes the gender of the victim or the abuser and failure to use gender-neutral language such as “partner” may shut down a supportive conversation before it begins. In addition to using gender-neutral language, an important part of being culturally responsive to the LGBTQ community is to use examples and pictures in marketing and awareness materials which represent LGBTQ relationships and individuals and to advertise services on LGBTQ-specific platforms such as websites, events and online forums.

STEPS GEORGIA CAN TAKE TO IMPROVE ACCESS TO CULTURALLY RELEVANT SERVICES FOR VICTIMS FROM MARGINALIZED COMMUNITIES:

- + **Ensure all responders receive ongoing culturally specific training and information addressing the intersection of domestic violence and marginalized and underserved**

communities. In addition to training by the organizations providing services to immigrant and refugee victims mentioned earlier, training options exist to address the needs of all types of marginalized communities. For suggested training on supportive interventions involving the LGBTQ community, please visit GeorgiaFatalityReview.com.

- + **Build mutually beneficial relationships and partnerships across service providers.** Responders advocating for victims of domestic violence from marginalized communities should engage in cross-training and build relationships with one another. Develop partnerships to meet interpretation and translation needs and to evaluate safe communities in which the victim may feel more comfortable.
- + **Examine agency policies and practices which may prevent members of underserved populations from accessing your services.** Examine your program’s intake forms, questionnaires and outreach materials for accessibility and visibility for different languages, abilities and cultural representations. Ensure Title VI of the Civil Rights Act and the Americans with Disabilities Act is being followed. Develop a language access plan to ensure language services are provided for all Limited English Proficient (LEP) people and develop a plan to better serve victims with disabilities during systems contacts including crisis or 911 calls, initial law enforcement response, follow-up investigations, prosecution-based case preparation and decisions, court proceedings, court and prosecutor-based victim advocacy services, and in written materials such as outreach letters and TPOs. For adequate translation, use “I Speak” booklets to help identify which languages the victim and perpetrator speak, available for download at dhs.gov/xlibrary/assets/crcl/crcl-i-speak-booklet.pdf.

GOAL 10

Address Barriers That Exist for Victims to Ensure Ongoing Safety and Financial Security

In reviewed cases, victims faced multiple barriers to economic stability which essentially trapped them in the abusive relationship. Many victims experienced economic abuse in addition to the physical and emotional abuse inflicted on them by the perpetrator.

Economic abuse occurs when one person in the relationship restricts the other person’s access to financial resources. Economic abuse takes many forms including employment-related abuse which occurs when the abuser prevents a victim from earning money. Abusive tactics perpetrators have employed include: preventing the victim from looking for jobs or attending job interviews; hindering the victim from attending her job; demanding the victim quit her job; and harassing the victim at work (National Coalition Against Domestic Violence, 2015). This kind of employment sabotage can result in

unemployment or underemployment, which can undermine the economic independence of victims.

For victims who are employed, domestic violence often has a negative impact on the victim's on-the-job performance. It is not unusual for an abuser to harass the victim at work, by showing up in the workplace or with frequent phone calls, text messages or emails. These disruptions may cause her to lose her job, in turn reinforcing her dependence on the abuser for financial support. The victim may also lose time from work as a result of injuries or court appearances, which can adversely affect her professional standing. Employers who view these absences as unacceptable may fire the victim. Even if an employer allows time off for these issues, it may come at the expense of the victim's pay, if she does not have sufficient or flexible leave.

It was difficult to quantify the impact or presence of economic abuse in cases reviewed by the Project because it is not often documented in police reports or court records. However, examples of financially abusive behaviors by perpetrators were commonplace. **In reviewed cases, abusers frequently stalked, harassed and threatened victims at their places of employment.** One victim's employer revealed the perpetrator often visited the victim at work and called her constantly, causing her to request that the receptionist screen her phone calls. Another victim's coworker shared how the abuser often called their office and harassed the victim. Still other perpetrators harassed the victims' colleagues directly, often accusing a male coworker of having an affair with the victim. There were also several examples of a perpetrator disabling and destroying a victim's vehicle, effectively preventing her from leaving and forcing her to rely on him for transportation or to fix the vehicle.

Access to a car or public transportation is a major factor in being able to obtain safety and self-sufficiency when leaving an abusive relationship. Transportation is essential to maintaining employment, caring for children, and accessing helping services such as domestic violence programs and the legal system. This is especially true in rural areas, where limited or no public transit services exist.

Other forms of economic abuse involve the abuser preventing the victim from accessing existing funds or sabotaging the victim's credit history. Acts limiting the victim's financial access, or those which force the victim to incur significant

debts, can have long-lasting impacts on the victim's financial future and may adversely impact ability to establish housing and other important resources independent from the abuser. These acts include:

- + forcing the victim to turn over money earned through their own employment
- + controlling the victim's access to debit or credit cards
- + ordering the victim to be on a disproportionately small budget compared to household earnings or expenses
- + limiting when or how the victim can access or use cash, bank accounts or credit cards
- + demanding the lease/mortgage or assets be in the abuser's name
- + using the victim's checkbook, debit card or credit cards without the victim's knowledge
- + overdrawing accounts so the victim is unable to provide for household expenses
- + applying for credit cards, obtaining loans or opening accounts in a victim's name without their knowledge or consent
- + forcing the victim to obtain loans or to sign financial documents

Limited financial resources can be the single greatest barrier to leaving an abusive relationship. One survey of domestic violence shelters revealed 74 percent of victims reported having stayed with an abuser longer, due to financial reasons (Mary Kay, 2012). In cases reviewed by the Project, many victims delayed leaving or were unable to leave abusers because they lacked the financial means to support themselves and their children. National research has indicated more than 50 percent of survivors stay with the abusive partner because they do not feel they can support themselves and their children (Sullivan, et.al. 1992). In reviewed cases, 71 percent of victims were raising minor children at the time of their death.

For victims with children, the impact of economic abuse can be even greater; victims may stay and endure abuse in order to provide shelter and food for their children. In reviewed cases, many abusers were not paying child support. In some circumstances, this lack of financial support was due to the victim's fear that requesting support would put them at further risk. Others had requested support, but the relief was either denied by the judge or the abuser was non-compliant with orders.

Gwendolyn's Story

Gwendolyn and Jim shared a teen son and had been separated for many years. Jim did not provide support for their son with any sense of regularity. Gwendolyn took Jim to court and the judge issued an initial order requiring Jim to contribute financially. Jim pressured Gwendolyn to drop the case, demanding she take care of it before he had to return to court. When the case continued to move forward, Jim grew increasingly angry at Gwendolyn, telling her he was unable to pay. He began to try to convince her he was sending money in other ways, but over multiple attempts, the funds never materialized.

One morning, Jim called Gwendolyn to again tell her he had sent money and she could go pick it up at Western Union. He asked her questions about her whereabouts and those of her children. Gwendolyn told him she was on her way to work and the children were headed to school. As Gwendolyn exited her home to go to work, Jim jumped out and attacked her, tasing her and causing her to fall to the ground. Jim straddled her, aimed his gun at her head and said, "Didn't I tell you to drop that child support case?" Jim shot Gwendolyn multiple times in her head and chest. The incident was witnessed by one of Gwendolyn's children who, unbeknownst to her, had missed the school bus.

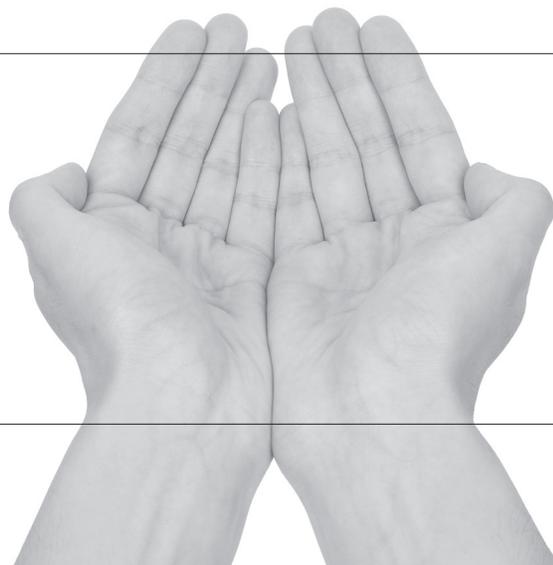
At the time of their death, 77 percent of victims in reviewed cases were employed. However, despite employment, many felt they were unable to support themselves away from the abusive relationship. Victims who were employed were not usually allowed to be in control of their finances. One financially abusive boyfriend would "hang around" the victim when she cashed her paychecks; he became violent when she would not give him her money.

It is important to note that in reviewed cases, more victims than perpetrators were employed at the time of the homicide. The stress that unemployment or underemployment may have caused in perpetrators' lives may have escalated their use of violence. Dr. Jacquelyn Campbell's research compared men who killed their female partner with abusive men who did not kill their partner and found unemployment was the most important demographic risk factor for homicide. In her study, the abuser's lack of employment was the only demographic risk factor that significantly predicted harm to the victim (Campbell et al., 2003).

For victims who wish to flee an abusive relationship, the process of leaving can be very expensive. Acquiring and setting up a new residence is costly when factoring in rent, utility deposits, moving expenses and costs associated with furnishings and living essentials. Victims who are married and/or share children with the perpetrator may be taking on additional legal fees for divorce or child custody proceedings. Victims with minor children who were dependent on the abusive parent for childcare may have additional costs after separating from the abuser and, if employed, the victim may be ineligible for social supports such as childcare assistance programs.

Economic abuse is a powerful tool because it limits the victim's mobility and options. By maintaining control of a victim's access to financial resources, an abuser ensures the victim will face economic hardship if they leave the relationship. The job loss or lack of employment resulting from the abuser's tactics contributes to victim isolation and reduces the likelihood that supportive coworkers or employers will intervene in the abuse. Further complicating the issue, financial abuse is often not seen as domestic violence. Individuals experiencing economic abuse may not identify as victims and may not reach out to helping resources. Many forms of economic abuse are not against the law, leaving victims with few options for civil or criminal recourse against a financially controlling abuser.

Economic abuse is a powerful tool because **it limits the victim's mobility and options.**



SYSTEMIC BARRIERS

Factors beyond direct financial abuse by the perpetrator also impact victims' ability to obtain ongoing safety and financial security. In reviewed cases, it was not uncommon for victims to face additional environmental barriers or systemic issues such as:

- + an absence of safe and affordable housing options
- + limited or no access to public transportation
- + lack of childcare
- + employment which fails to provide a living wage
- + high health insurance premiums

Addressing these issues from a policy standpoint will provide victims of domestic violence with opportunities for longer-term financial stability imperative to achieving lasting safety, whether they leave or remain in the relationship.

When a victim wants to leave an abusive relationship, they often have no place to go. Many victims in reviewed cases sought refuge with family and friends, but these were usually short-term solutions which lacked stability. Only 14 percent of victims in reviewed cases stayed in a domestic violence shelter. Domestic violence is the third leading cause of homelessness among families in the United States (U.S. Conference of Mayors, 2012). Lack of affordable housing and long waiting lists for rent-assisted or transitional housing mean many women and children are forced to choose between abuse at home or homelessness.

Poverty is another burden which adversely affects victim safety. Domestic violence happens at all income levels, but low-income women are more vulnerable to its effects because of a lack of resources and opportunities. Because it takes a tremendous amount of financial resources to leave an abusive relationship, experiencing domestic violence can make the journey out of poverty nearly impossible (Davies, 2002). Poverty is a gendered issue as much as domestic violence is and, overall, women in the workforce are paid less than their male counterparts. They are more likely to take part-time work and drop out of the labor market altogether to raise children or take care of ailing family members. Moreover, the jobs women are socialized to obtain often yield lower financial rewards.

The impacts are even greater for women of color who, due to historical inequities in distributions of wealth, redlining and

systematic educational disparities, are more likely to live in poverty and low-income neighborhoods than White women (Gill & Lovelace-Davis, 2016). Likewise, for immigrant women, the barriers to financial stability are exacerbated by language barriers, cultural bias which may affect the hiring process and, in some cases, uncertain legal status.

Victims often earn below what is considered a living wage, or the minimum income necessary for someone to meet their basic needs based on where they live, a factor which contributes to keeping them at an economic disadvantage. In most locations, the government-mandated minimum wage employers are obligated to pay their workers is lower than what could be considered a living wage.

Efforts have been made in recent years to push states to increase their minimum wage above the federal minimum and require all jobs to meet the living wage threshold for their region. Georgia legislators have not carried that torch. In fact, according to information released by the Georgia Budget and Policy Institute, wages in 2017 in Georgia remained mostly stagnant (Tharpe, et.al, 2013). Data shows the median wage for all Georgians remains below the wage level of Georgians prior to the Great Recession of the late 2000s (Tharpe, et al., 2013).

STEPS GEORGIA CAN TAKE TO ADDRESS BARRIERS THAT EXIST FOR VICTIMS TO ENSURE ONGOING SAFETY AND FINANCIAL SECURITY:

- + **Bolster economic supports for domestic violence victims and the poor.** Increased emphasis on services and strategies supporting long-term economic stability and well-being are imperative to victim safety. This may include increasing wages, supporting the creation of new jobs for the unemployed and underemployed, and adequately funding programs supporting working parents, including subsidized childcare and transportation. Equally important is the development of policies to help employees who are domestic violence victims safely maintain their employment.
- + **Ensure housing protections for victims of domestic violence are in place and observed.** Local landlords, property managers and housing authorities should be trained on domestic violence and relevant state laws protecting victims' housing rights.



Hope for **the** **Future**

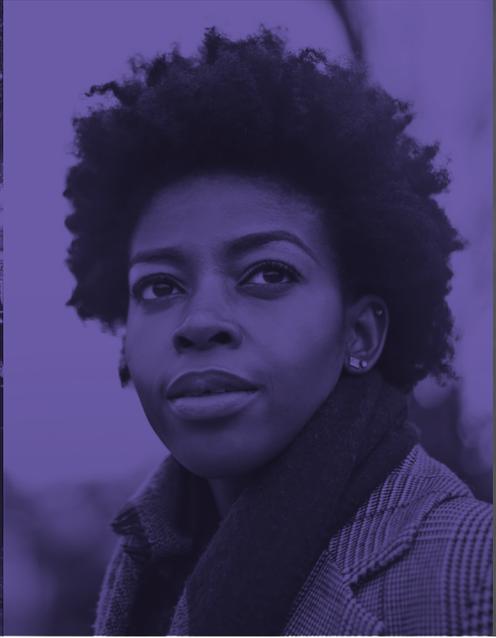
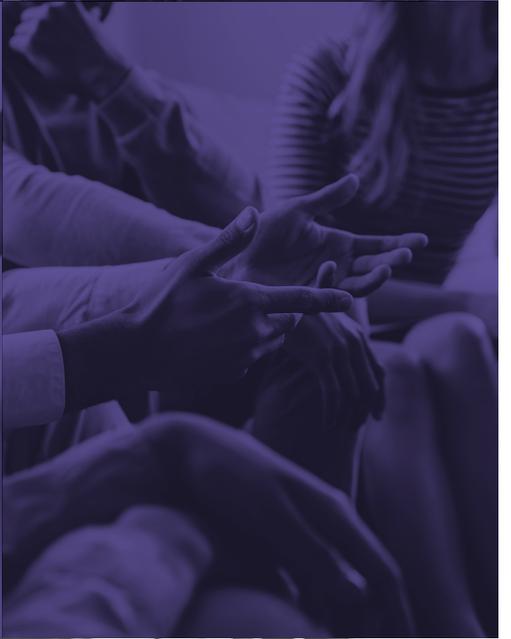
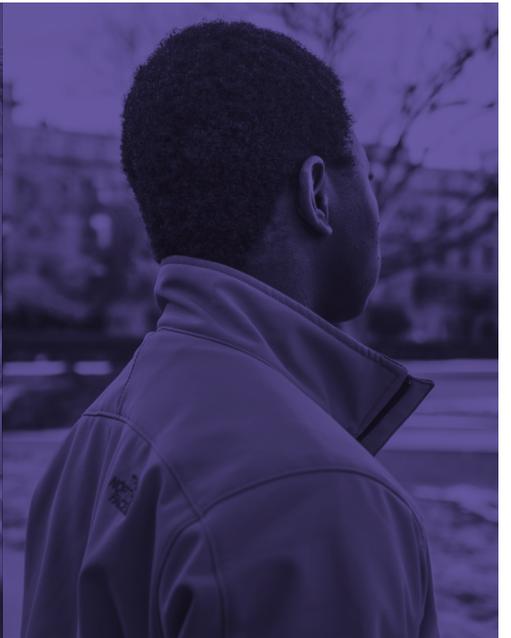
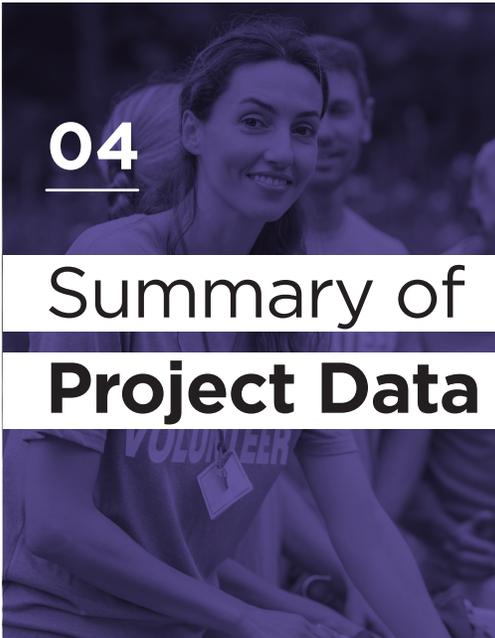


While the Georgia Domestic Violence Fatality Review Project is ending in its current incarnation, the Project's partners plan to remain heavily rooted in its work moving forward. As we focus on additional methods of data collection and implementation of Project recommendations, we call on you to evaluate how the Project's work can live on in your community. Read the past Fatality Review Annual Reports and remember the stories of those who have lost their lives to domestic violence. Share victims' names and stories at events which honor domestic violence victims and survivors. Share the reports' content and findings with peers and colleagues; use it to engage in evaluating how your community responds to victims and perpetrators. Utilize Project recommendations to drive your agency or task force's strategic plan and prioritize developing strategies which are noted in the 10 key goals outlined earlier in this report.

As the Project comes to its close, we acknowledge that fatality review remains a valuable tool for community change. Critical analysis of domestic violence response at the local level is invaluable. Communities are encouraged to continue engaging in these important discussions by mirroring the processes of the Project, conducting reviews, making and acting on recommendations for change.

04

Summary of Project Data



1) TYPES OF HOMICIDE CASES REVIEWED BY THE PROJECT (2004-2018)

	#CASES	0 %	25	50	75	100	
Single Homicide of Primary Victim	55						52%
Single Homicide of Secondary Victim	3						3%
Homicide of Primary Victim / Suicide of Perpetrator	29						27%
Homicide of Primary Victim / Attempted Suicide of Perpetrator	6						6%
Homicide of Primary Victim / Homicide of Secondary Victim(s)	4						4%
Homicide of Primary Victim / Attempted Homicide of Secondary Victim(s)	3						3%
Homicide of Primary Victim / Homicide of Secondary Victim(s) / Suicide of Perpetrator	6						6%

2) INDIVIDUALS WHO WERE PRESENT, WITNESSED OR KILLED IN REVIEWED HOMICIDE CASES (2004-2018)

RELATIONSHIP TO VICTIM	PRESENT			WITNESSED			KILLED		
	# Cases	% Cases	# Individuals	# Cases	% Cases	# Individuals	# Cases	% Cases	# Individuals
Children	39	37%	84	39	37%	70	5	5%	6
Family Members (Other Than Children)	23	22%	37	17	16%	25	4	4%	5
Friends	7	7%	10	4	4%	5	0	0%	0
New Partner of Victim	5	5%	5	3	3%	3	3	3%	3
Coworkers	4	4%	10	3	3%	9	1	1%	1
Neighbors/Acquaintances	11	10%	28	12	11%	25	0	0%	0
Strangers/Bystanders	13	12%	84	12	11%	79	0	0%	0
	Individuals Present		258	Individuals Witnessed		216	Individuals Killed		15

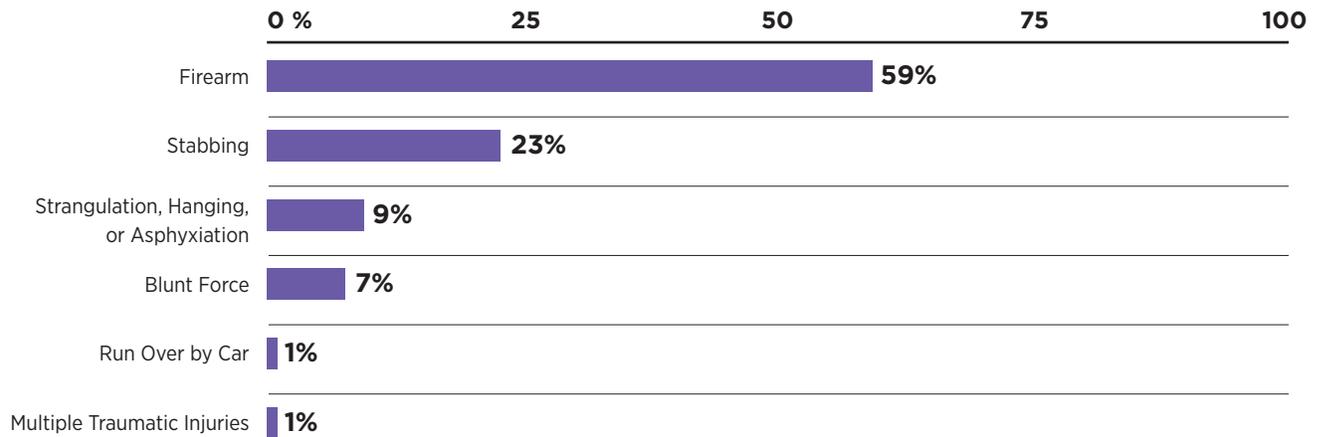
Chart 1 and 2 Key Points: The majority (52%) of the cases reviewed by the Project between 2004 and 2018 were single-victim homicides. 39% of reviewed cases were classified as attempted or completed murder-suicides. In addition to the 106 Project reviewed homicide cases, one victim suicide and nine near fatalities were also reviewed.

Chart two describes who was present, a witness to, or killed during the fatality. For the purpose of this chart, individuals labeled as “present” are those who were in the same area where the homicide occurred but did not have any sort of sensory experience of the homicide (e.g., hearing or seeing the homicide occur). Those individuals who did have a sensory experience of the homicide have been determined to have “witnessed” the homicide. Contrary to the popular stereotype of domestic violence as a “private” issue, in 60% of reviewed cases someone other than the victim and perpetrator was present, a witness to, and/or killed at the time of the homicide. It is not uncommon for bystanders to

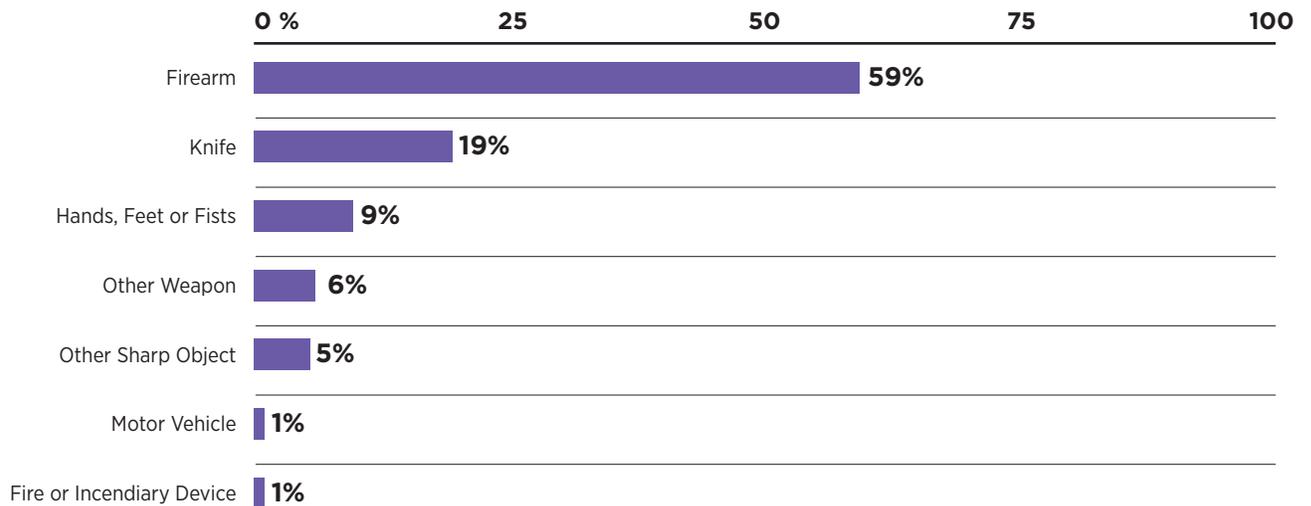
witness the fatal incidents of abuse in reviewed cases. Witnesses to the fatal incident were present in 52% of cases reviewed by the Project. In 37% of reviewed cases, one or more children witnessed the fatal incident. Often, if the children did not directly witness the homicide, they were the first to discover their deceased parent or caregiver. There is a critical need to assist children dealing with the traumatic effects of witnessing a fatal incident, losing one or both parents or caregivers, and witnessing domestic violence.

Abusers do not limit their violence to their intimate partner. In 12% of cases, someone other than the intimate partner victim or perpetrator was also killed. This includes children of the intimate partner, new dating partners, family members, and bystanders. Often, other people close to the victim are targeted because they are with the primary victim at the time of the attack, or because the perpetrator intends to cause additional anguish to the primary victim by harming her friends or loved ones.

3) VICTIM CAUSE OF DEATH IN REVIEWED HOMICIDE CASES (2004–2018)



4) WEAPONS USED IN FATAL INCIDENT IN REVIEWED HOMICIDE CASES (2004–2018)



Charts 3 and 4 Key Points: Outnumbering all other means combined, firearms (59%) were the leading cause of death for victims in cases reviewed between 2004 and 2018. The presence of a firearm in domestic violence situations increases the risk of homicide, regardless of who owns the gun. The Project’s ongoing finding of firearms as the leading cause of death underscores our repeated recommendation to use all legal means possible to remove firearms from the hands of domestic violence abusers.

Perpetrators were in possession of a firearm while a Temporary or Permanent Protective Order was in effect in 13 reviewed cases. Though this accounts for 12% of cases overall, when you

consider only cases where a TPO was in effect and firearms possession was known, this figure represents 24% of reviewed cases. Perpetrators were in possession of a firearm after having been convicted of a crime of domestic violence under the Family Violence Act in eight cases, representing 8% of all cases.

In 12% of reviewed cases, 15 individuals other than the intimate partner victim were killed during the incidents. In those circumstance, 11 individuals died by firearm (73%), two by stabbing (13%), one by strangulation/hanging/asphyxiation (7%) and one by blunt force (7%).

5) LOCATION OF FATAL INCIDENT IN REVIEWED HOMICIDE CASES (2004–2018)

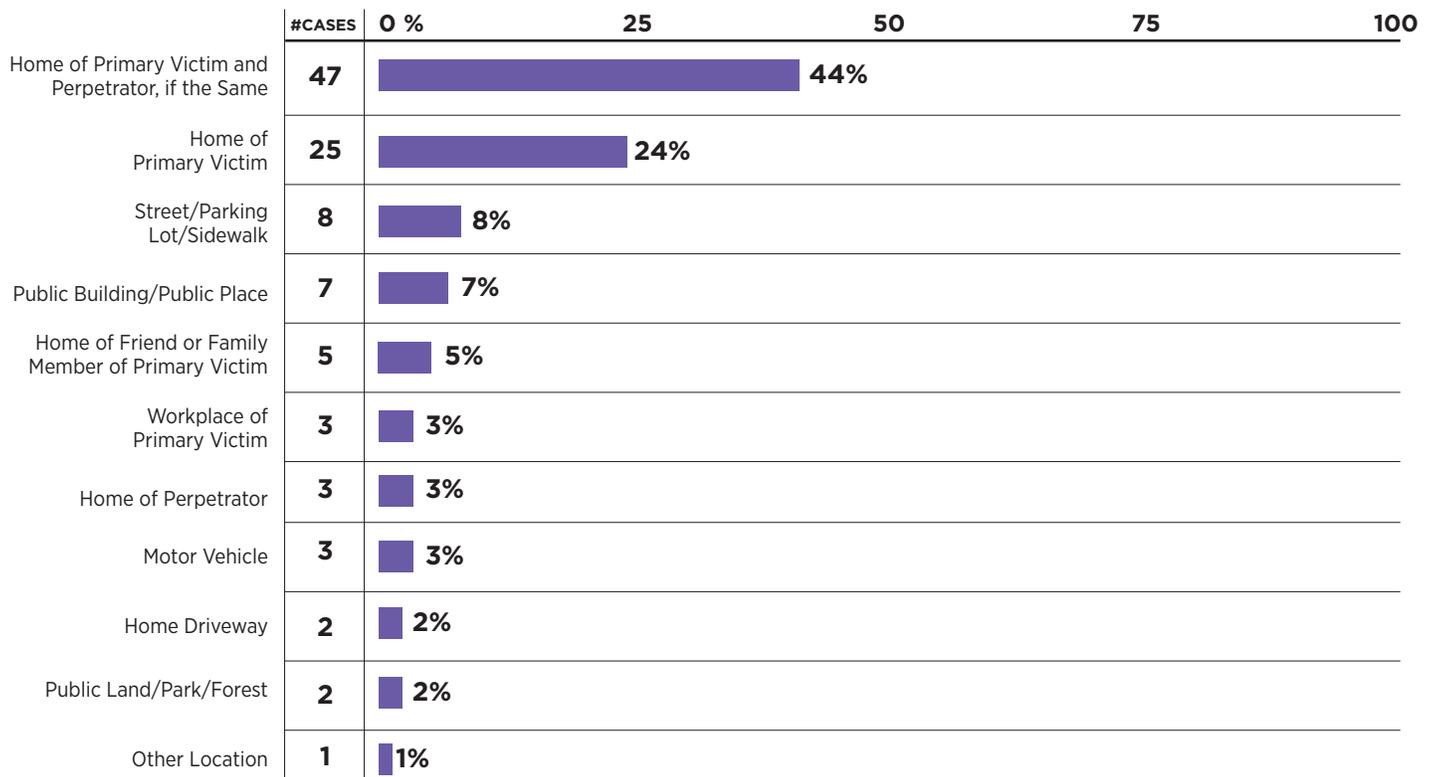
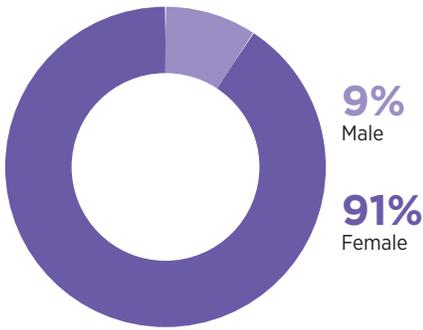


Chart 5 Key Points: Most fatal incidents reviewed by the Project occurred in the home of the victim and perpetrator or the home of the victim (68%). The victim and perpetrator were known to be living together at the time of the homicide in 52 cases (49%). Often children and other adults also shared these living spaces – homes which are now crime scenes. Beyond the disruption and potential trauma of families not being allowed in these spaces during the investigation, once the investigation is complete, some families return to a home filled with memories and tragedy to retrieve belongings and handle the estates of their deceased loved ones. Neighbors and communities may also be impacted by the violence that took place within a house in their neighborhood. The Georgia Crime Victims Compensation Program can assist surviving family members with the cost of crime scene cleanup and counseling. Please visit their website for more information: crimevictimscomp.ga.gov.

In one-quarter of reviewed cases (25%), the homicide occurred in someone else's home or a more a public space, which inherently increases the risk of bystanders being injured or killed. The likelihood of additional witnesses being exposed to the trauma of a fatal incident also increases significantly when the incident occurs in a public space. The 2017 Georgia Domestic Violence Fatality Review Annual Report focuses on intimate partner stalking. The Report notes a trend that fatal incidents in reviewed cases which involved stalking were at an increased likelihood to occur in a public space. You can read more about that trend by downloading the report from GeorgiaFatalityReview.com.

6) GENDER OF PRIMARY VICTIM IN REVIEWED HOMICIDE CASES (2004-2018)



7) GENDER OF PERPETRATOR IN REVIEWED HOMICIDE CASES (2004-2018)

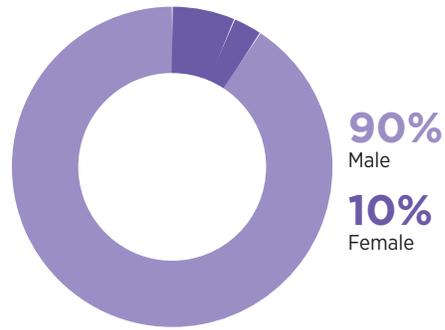


Chart 6 and 7 Key Points: In cases reviewed by the Project, nine female perpetrators killed male partners, two female perpetrators killed female partners, and one male perpetrator killed a male partner. All remaining homicides reviewed between 2004 and 2018 were male perpetrators killing a female victim.

8) EMPLOYMENT STATUS OF VICTIM AND PERPETRATOR IN REVIEWED HOMICIDE CASES (2004-2018)

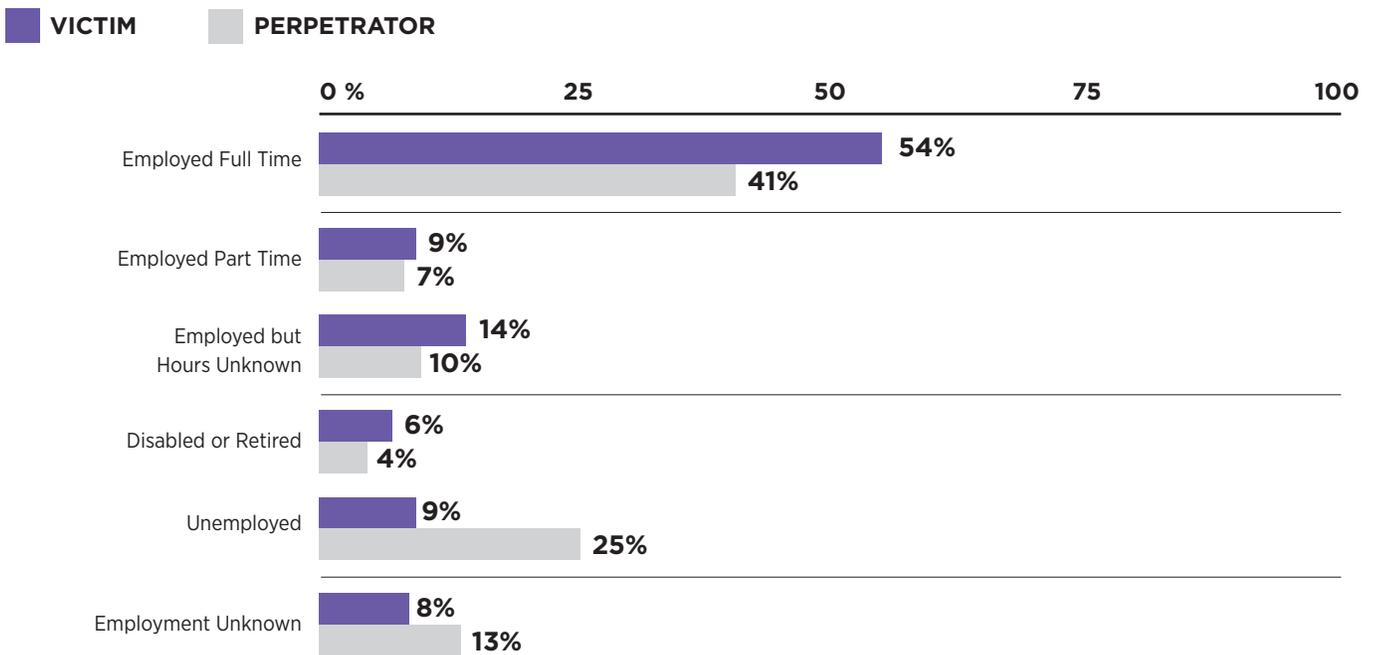


Chart 8 Key Points: 77% of victims and 58% of perpetrators were employed at the time of the homicide. Fatality reviews revealed coworkers often knew domestic violence was occurring, but they were not always aware of the extent of violence or how to help. Engaging the business community

in the work to end to domestic violence is essential. For more information on working with the business community, request the Domestic Violence in the Workplace Train the Trainer Kit at GeorgiaFatalityReview.com/resources/.

9) AGE OF VICTIM AND PERPETRATOR IN REVIEWED HOMICIDE CASES (2004–2018)

■ VICTIM ■ PERPETRATOR

AGE WHEN RELATIONSHIP BEGAN

AGE WHEN HOMICIDE OCCURRED

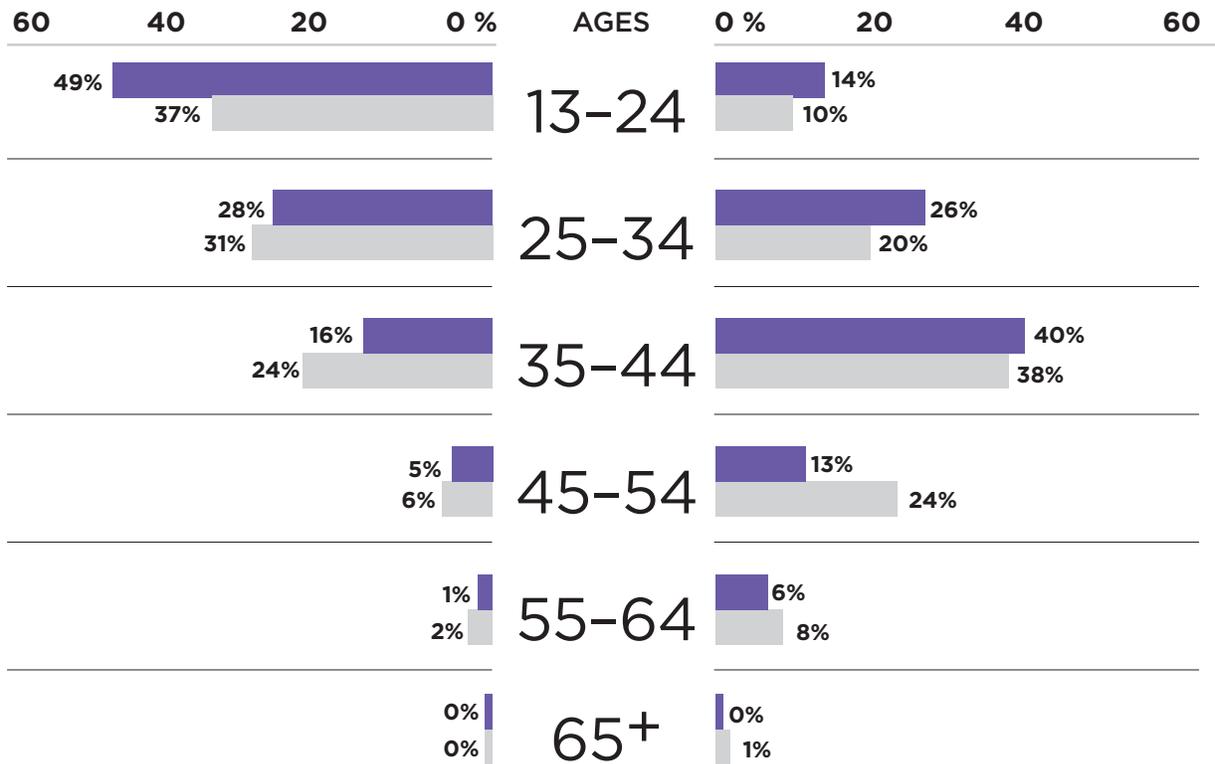


Chart 9 Key Points: The Project has reviewed cases involving victims and perpetrators who comprise a wide range of ages, but many of these relationships began when the parties were quite young. In nearly half (49%) of reviewed cases, the victim was between ages 13–24 when the fatal relationship began. 24% of victims were between ages 13–19.

Although a considerable number of relationships started when the victim was young, many of these relationships spanned several years. The Project found 40% of victims were killed when they were between the ages 35–44. These numbers demonstrate that many of the relationships lasted well beyond 10 years and highlight the need for early intervention for teens experiencing dating violence.

10) RELATIONSHIP STATUS AT TIME OF FATAL INCIDENT IN REVIEWED HOMICIDE CASES

(2004-2018)

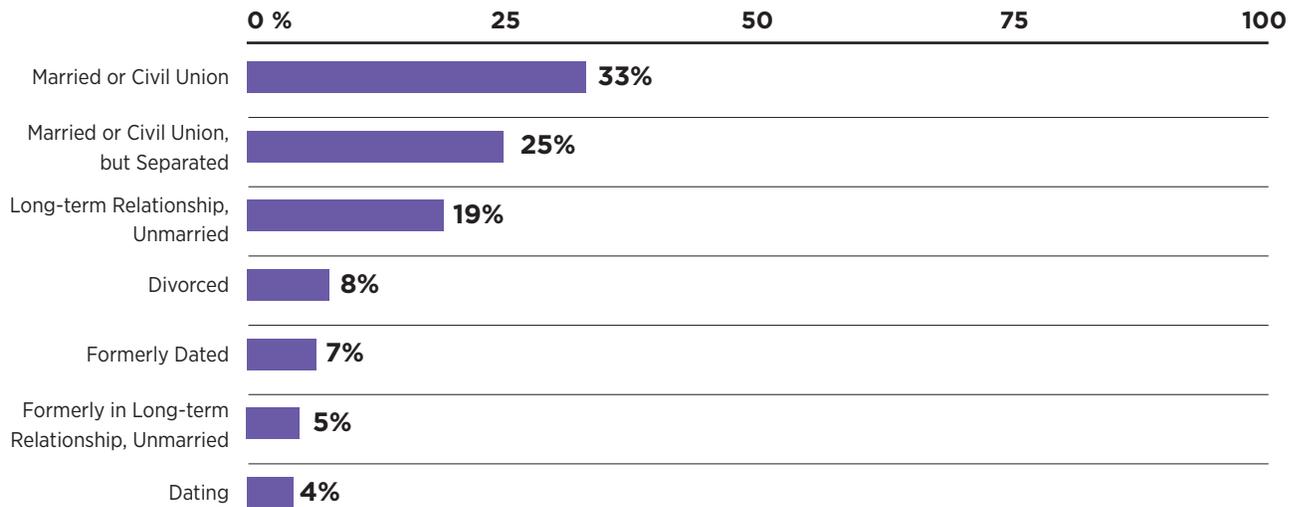


Chart 10 Key Points: The majority of fatal incidents involve current or former intimate partners in a long-standing relationship. In only 4% of reviewed cases were the parties involved in a shorter-term dating relationship at the time of the fatal incident. More than half (52%) of couples were in a long-term relationship [married or civil union (33%) or long-term relationship but unmarried (19%)] at the time of the fatal incident.

In just under half (45%) of reviewed cases, the relationship had ended or the couple had separated. 8% were divorced, 25% were married or in a civil union but were separated at the time of the incident, 5% were formerly in a long-term relationship and 7% had formerly dated. The victim and perpetrator were in the process of a divorce in 15 cases (14%).

What this chart does not reflect, however, is that almost all victims were contemplating leaving the relationship or taking steps to do so. Victims are at the highest risk of being killed by their abusive partners when they separate from them. Both rates of, and severity of physical abuse increase during periods of separation. Even when a victim’s desire to leave is not spoken aloud, any increase in behaviors or steps to gain independence may signal to the partner they are losing control over the victim. Taking a new job, increasing social activities, saving money, and changing locks on doors can all signal to an abuser that the victim is serious about leaving and is actively taking steps to separate.

11) SHARED MINOR CHILDREN IN REVIEWED HOMICIDE CASES

(2004-2018)

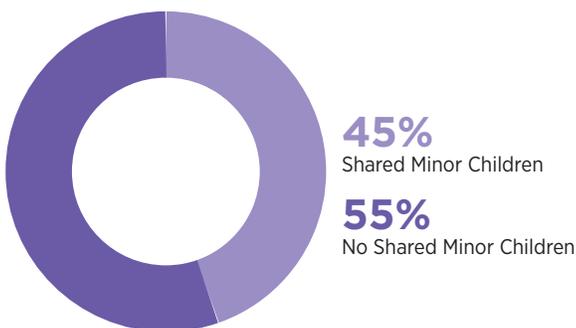


Chart 11 Key Points: The victim was a parent to minor children in 71% of cases reviewed by the Project. In 45% of cases, the victim shared a minor child with the perpetrator. When the parties shared minor children, the child lost both parents to murder-suicide in 40% of reviewed cases.

Sharing children can significantly increase victims’ barriers to safety, affecting their decisions to leave the relationship, their ability to support themselves and their children away from the abuser, and continued interactions with the abuser regarding custody arrangements. In some cases, the fatal incident occurred in the presence of children during a custody exchange. Supervised visitation and safe exchange locations are important options for maintaining the safety of victims and their children. You can read more about the impact of domestic violence on children in the 2015 Georgia Domestic Violence Fatality Review Project’s Annual Report, available for download at GeorgiaFatalityReview.com.

12) PERPETRATOR'S KNOWN LETHALITY INDICATORS IN REVIEWED HOMICIDE CASES (2004-2018)

		PERCENTAGE OF PARTIES WHO WERE AWARE THIS FACTOR WAS PRESENT						
		% OF CASES WHERE THIS FACTOR WAS PRESENT	Friends/ Family	Bystanders/ Neighbors	Law Enforcement	Criminal Courts	Civil Courts	Service Providers
VIOLENT BEHAVIORS	History of Domestic Violence Against Victim	91%	78%	0%	65%	31%	23%	28%
	Stalking	58%	70%	0%	38%	21%	16%	16%
	Threats to Kill the Primary Victim	55%	71%	0%	43%	21%	24%	19%
	Violent Criminal History	48%	45%	0%	96%	63%	8%	14%
	Threats to Harm Victim with Weapon	38%	65%	0%	50%	28%	15%	18%
	Child Abuse Perpetrator	26%	82%	0%	32%	18%	18%	32%
	History of DV Against Others	26%	64%	0%	75%	50%	14%	7%
	Inflict Serious Injury on Victim	25%	85%	0%	69%	46%	0%	42%
	Sexual Abuse Perpetrator	21%	45%	0%	50%	23%	27%	27%
	Strangulation	23%	50%	0%	58%	38%	17%	21%
	Threats to Kill Children, Family and/or Friends	16%	71%	0%	53%	35%	18%	12%
	Harmed Victim with Weapon	12%	77%	0%	85%	62%	15%	31%
	Hostage Taking	8%	67%	0%	56%	33%	22%	22%
CONTROLLING BEHAVIORS	Monitoring and Controlling	56%	90%	0%	14%	2%	19%	19%
	Isolation of Victim	32%	94%	0%	0%	0%	6%	9%
	Ownership of Victim	26%	96%	0%	14%	7%	11%	18%
MENTAL HEALTH/ SUBSTANCE ABUSE ISSUES	Alcohol and Drug Abuse	52%	84%	0%	64%	36%	13%	18%
	Suicide Threats and Attempts	37%	74%	0%	33%	15%	10%	44%
	Depression	34%	81%	0%	17%	11%	14%	64%

Chart 12 Key Points: There have been numerous studies and projects implemented around the country focused on determining what factors indicate an increased risk in domestic violence cases. The bottom line is there is no single factor or set of factors which can be considered absolute indicators of increased risk for serious injury or homicide. That said, several indicators have emerged from the research and the work of Fatality Review

Teams around the country which can be considered significant in contributing to an increased risk for homicide. The chart above details the factors identified in reviewed cases. More often than not, victims experienced a cluster of factors that were causes for concern. Evaluating the prevalence of the tactics of abuse used by perpetrators provides a window into the victim's experience and is essential to safety planning with victims.

13) AGENCIES AND SERVICES KNOWN TO BE INVOLVED WITH VICTIMS OR PERPETRATORS IN THE FIVE YEARS PRIOR TO THE FATALITY IN REVIEWED HOMICIDE CASES (2004–2018)

AGENCY / SERVICE / PROGRAM		VICTIMS		PERPETRATORS	
		#	% TOTAL CASES	#	% TOTAL CASES
JUSTICE SYSTEM AGENCIES	Law Enforcement	84	79%	88	83%
	Prosecutor	42	40%	58	55%
	Magistrate Court	32	30%	42	40%
	Municipal Court	6	6%	9	8%
	State Court	23	22%	38	36%
	Superior Court	35	33%	42	40%
	Civil Court, Including Juvenile	23	22%	23	22%
	Court-based Legal Advocacy	14	13%	2	2%
	Protection Order Advocacy	16	15%	2	2%
	Legal Aid or Georgia Legal Services	3	3%	0	0%
	Probation	12	11%	40	38%
	Parole	2	2%	11	10%
	Supervised Visitation	1	1%	0	0%
SOCIAL SERVICE AGENCIES	Child Protective Services (DFCS)	13	12%	11	10%
	TANF or Food Stamps	8	8%	3	3%
	Medicaid	6	6%	2	2%
	Child Care Services	5	5%	2	2%
	Homeless Shelter	2	2%	1	1%
	PeachCare	1	1%	0	0%
	WIC	6	6%	0	0%
HEALTH CARE AGENCIES	Private Physician	25	24%	20	19%
	Emergency Medical Services (EMS)	14	13%	10	9%
	Hospital	24	23%	21	20%
	Emergency Medical Care	20	19%	9	8%
	Mental Health Provider	12	11%	25	24%
	Substance Use Program	3	3%	7	7%
FAMILY VIOLENCE AGENCIES	Community-based Advocacy	18	17%	4	4%
	Domestic Violence Shelter or Safe House	15	14%	0	0%
	Family Violence Intervention Program (FVIP)	2	2%	11	10%
	Sexual Assault Center	1	1%	1	1%
MISCELLANEOUS AGENCIES	Religious Community	34	32%	25	24%
	Immigrant Resettlement	2	2%	1	1%
	Anger Management	1	1%	5	5%
	Animal Control	1	1%	0	0%
	English as a Second Language (ESL)	1	1%	0	0%

Chart 13 Key Points: In reviewed cases, 83% of perpetrators and 79% of victims had contact with law enforcement during the five years prior to the fatal incident. In contrast, only 14% of victims in reviewed cases had contact with a domestic violence program during the five years leading up to the fatal incident. This gap in the rate of contact represents the essential role law enforcement personnel can play in ensuring victims receive referrals to the vital services offered by domestic violence programs throughout Georgia.

An analysis of the rate of contact with law enforcement yielded interesting results. Although many victims were known to be in contact with law enforcement, these contacts were not always related to the abuse — though, in theory, these contacts held a potential for intervention. Victims were in contact with law enforcement directly related to the abuse in 75% of cases.

In reviewed cases, both victims (32%) and perpetrators (24%) had significant contact with religious communities, highlighting a largely untapped opportunity for intervention by the couple's faith leaders. Religious communities have great potential for offering resources, referrals and safety to their congregants. Materials on outreach to the faith community on the issue of domestic violence including *Safe Sacred Space: A Manual for Faith Leaders* and *Safe Sacred Space: A Training Guide for Family Violence Task Forces* are available for download at [GeorgiaFatalityReview.com/resources/](https://www.GeorgiaFatalityReview.com/resources/).

TPOs are a highly useful tool for victims seeking safety from abuse, but they must be considered only a portion of a complete safety plan.

14) TEMPORARY PROTECTIVE ORDERS IN REVIEWED HOMICIDE CASES (2004-2018)

	PERCENTAGE OF REVIEWED CASES (KNOWN)	
	YES	NO
Did the victim ever file a TPO against the perpetrator?	24%	76%
Were TPOs ever dropped by the victim?	44%	56%
Were TPOs ever violated by the perpetrator prior to the homicide?	85%	15%
Was a TPO in effect at time of the homicide?	13%	87%
If TPO was granted July 2002 or later, was perpetrator ordered to FVIP?	21%	79%
If TPO was granted prior to July 2002, was perpetrator ordered to either anger management or family violence counseling?	30%	70%

Chart 14 Key Points: In reviewed cases, 24% of victims had previously obtained a Temporary Protective Order (TPO) against their perpetrator. 13% of those victims had a TPO in place at the time of the fatal incident. TPOs are a highly useful tool for victims seeking safety from abuse, but they must be considered only a portion of a complete safety plan. Obtaining a TPO is a multi-step

process, which in turn may lead to an escalation in threatening or violent behavior by the perpetrator. It is imperative all victims of domestic violence seeking relief from the courts be referred to a domestic violence advocate who can explore the potential risks associated with filing a TPO, conduct risk assessment and safety planning, and offer additional resources and support.

15) INVESTIGATION AND PROSECUTION OUTCOMES IN REVIEWED HOMICIDE CASES (2004-2018)

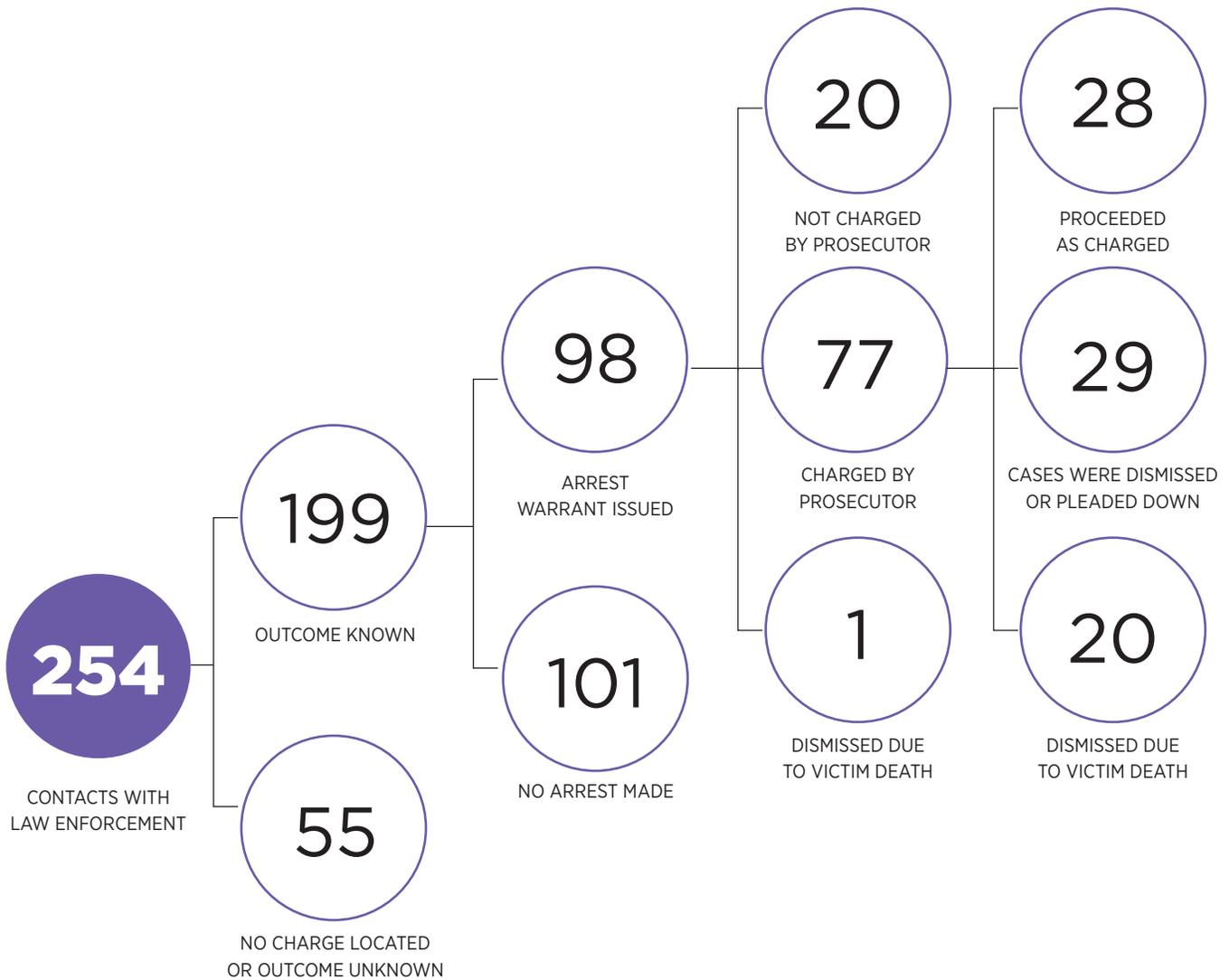


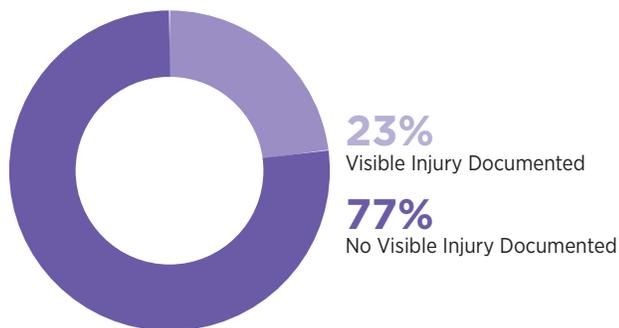
Chart 15 Key Points: In 73 reviewed cases, the victim was known to be in contact with law enforcement and the number of contacts were known. In those cases, there were 254 contacts made with officers, and the outcome was known in 78% of those calls. Because law enforcement often acts as the first point of contact between the victim and the criminal legal system, officers have a unique opportunity to influence victim safety. It is crucial for law enforcement officers to both make arrests and make effective referrals for victim services on-scene.

In the 199 known outcomes, half showed no arrest was made by law enforcement or there was no record of charges against the accused abuser. Most often, officers did not make arrests because they did not find probable cause or because the perpetrator

fled the scene. In cases reviewed between 2004 and 2018, 34% of victims were advised to apply for their own arrest warrants. Referring the victim to seek their own warrant increases barriers to justice and safety risks for victims.

Of the cases where law enforcement was called and an arrest was made, prosecutors pursued a majority (79%) of family violence arrests. However, of the cases where charges were pursued by prosecutors, a significant number (38%) were later dismissed or pled down. In 26% of cases charged by the prosecutor, charges were dismissed because the victim was killed prior to the case proceeding to prosecution. This suggests the period following a perpetrator’s arrest is one of heightened risk to the victim and may warrant an expedited prosecutorial process.

16A) HISTORY OF DOCUMENTED VISIBLE INJURY TO THE VICTIM IN REVIEWED HOMICIDE CASES (2004-2018)



16B) HISTORY OF DOCUMENTED MAJOR INJURY TO THE VICTIM IN REVIEWED HOMICIDE CASES (2004-2018)

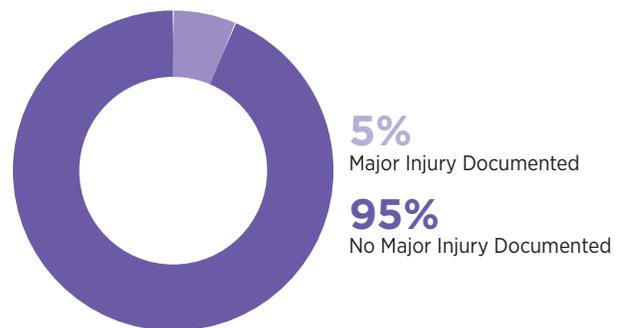


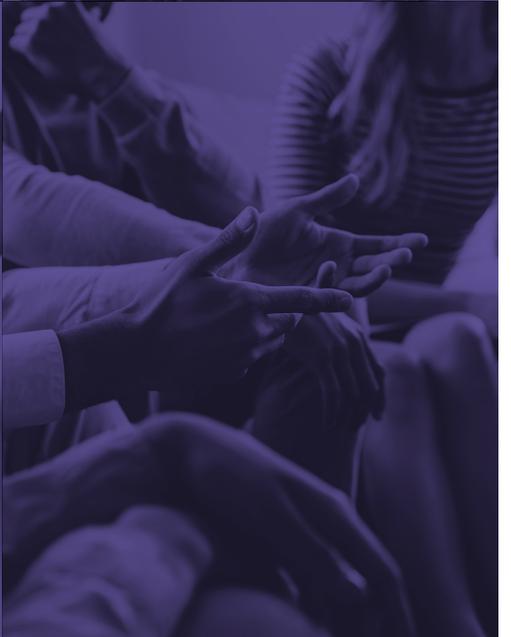
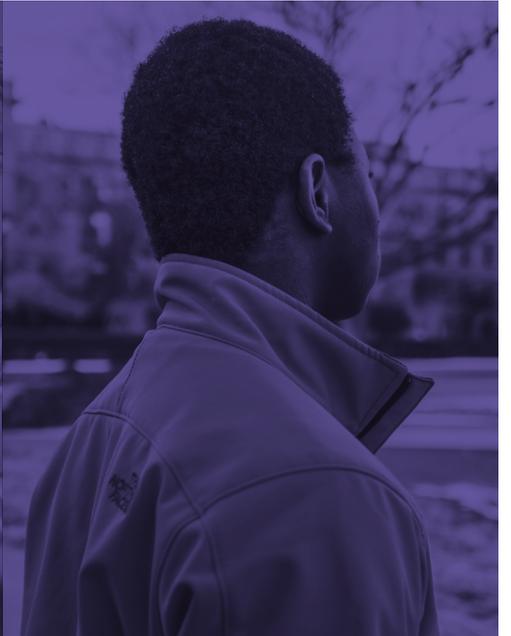
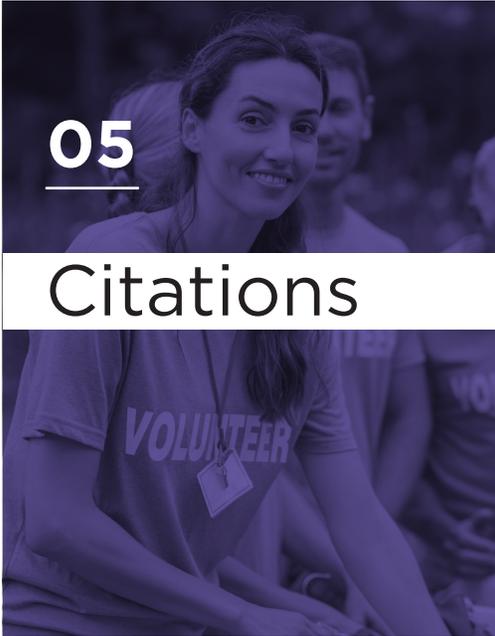
Chart 16a and 16b Key Points: Of the 254 contacts victims made with law enforcement about abuse, in 195 incidents (77%), there were no visible injuries documented in an incident report. Though injuries were documented in 59 incidents, major injury was documented in only 13 incident reports (5%). In cases where a visible injury was documented, 22% had a major injury documented and 78% documented an injury

which was not considered major. These findings suggest prior injury may not be the most pertinent indicator for victims at risk for intimate partner homicide. To identify high-risk victims and provide appropriate intervention, advocates and law enforcement conducting risk assessments must consider the comprehensive combination of the victim's experiences, beyond solely physical violence.



05

Citations



- Adams, D. (2003). "Certified Batterer Intervention Programs: History, Philosophies, Techniques, Collaborations, Innovations and Challenges." *Clinics in Family Practice*, Vol. 5(1). Retrieved from https://www.futureswithoutviolence.org/userfiles/file/Children_and_Families/Certified%20Batterer%20Intervention%20Programs.pdf.
- Alisic, E., Krishna, R., Groot, A., Frederick, J.W. (2015) "Children's Mental Health and Well-Being After Parental Intimate Partner Homicide: A Systematic Review." *Clinical Child and Family Psychology Review*, December 2015, 18(4): 328–45. doi: 10.1007/s10567-015-0193-7.
- American Foundation for Suicide Prevention (2018). "Suicide Statistics." Retrieved October 24, 2018, from <https://afsp.org/about-suicide/suicide-statistics/>.
- American Humane Association (2016). "Understanding the Link Between Animal Abuse and Family Violence." Washington, DC. Points to Ascione, F. R. (1998). "Battered women's reports of their partners' and their children's cruelty to animals," *Journal of Emotional Abuse*, 1(1), 119–133.
- Arias, I., Dankwort, J., Douglas, U., Dutton, M. A., & Stein, K. (2002). "Violence Against Women: The State of Batterer Prevention Programs." *Journal of Law, Medicine & Ethics*, 30(3), 157.
- Baladerian, N. J. Ph.D., Coleman, T. F. & Stream, J. (2013). "Abuse of People with Disabilities: Victims and Their Families Speak Out: A report on the 2012 National Survey on Abuse of People with Disabilities Spectrum Institute Disability and Abuse Project." Retrieved September 17, 2018, from <http://disability-abuse.com/survey/survey-report.pdf>.
- Battered Women's Justice Project (2016). "An overview of federal and state law related to domestic violence and firearms." National Domestic Violence and Firearms Resource Center (Safer Families Safer Communities) and Battered Women's Justice Project. Retrieved June 27, 2018, from <http://www.preventdvgunviolence.org/assets/documents/legal-landscape/an-overview-of-federal-and-state-law-related-to-domestic-violence-and-firearms.pdf>.
- Benson, M. L. & Fox, G. L. (2004). "When Violence Hits Home: How Economics and Neighborhood Play a Role." U.S. Department of Justice. Retrieved from <https://www.ncjrs.gov/pdffiles1/nij/205004.pdf>.
- Breul, N., & Luongo, D. (2018). "Making it safer: A study of law enforcement fatalities between 2010–2016." National Law Enforcement Officers Memorial Fund. Retrieved October 24, 2018, from http://www.nleomf.org/assets/pdfs/officer-safety/COPS3_Final_4-2-18.pdf.
- Bureau of Labor Statistics (2018). "Employment status of the civilian population by race, sex, and age." Retrieved September 17, 2018, from <https://www.bls.gov/news.release/empsit.t02.htm>.
- Campbell, J. (2017). Presentation deck on the Danger Assessment in Practice, at the Georgia Commission on Family Violence 23rd Annual Conference, Athens, Ga., November 7, 2017.
- Campbell, J. C., Webster, D. W., Koziol-McLain, J., Block, C., Campbell, D., Curry, M. A., et al. (2003). "Risk factors for femicide in abusive relationships: Results from a multisite case control study." *American Journal of Public Health*, 93(7), 1069–1097.
- Capezza, N., Schumacher, E., & Brady, B. (2015). "Trends in Intimate Partner Violence Services Provided by Substance Abuse Treatment Facilities: Findings from a National Sample." *Journal of Family Violence*, 30(1), 85. doi:10.1007/s10896-014-9649-7.
- Carlisle-Frank, P., Frank, J.M., Nielsen, L. (2004). "Selective battering of the family pet." *Anthrozoos*, 17, 26–4.
- Catalano, S. (2015). "Intimate Partner Violence, 1993–2010." U.S. Department of Justice, Office of Justice Programs, Bureau of Justice Statistics special report, revised September 29, 2015. Retrieved from <https://www.bjs.gov/content/pub/pdf/ipv9310.pdf>.
- Center for American Progress (2017). "Poverty Data State Report." Retrieved from <https://talkpoverty.org/state-year-report/georgia-2017-report/>.
- Centers for Disease Control and Prevention (2006). "Physical Dating Violence Among High School Students—United States, 2003." *Morbidity and Mortality Weekly Report*, May 19, 2006, Vol. 55, No. 19.
- Centers for Disease Control and Prevention (2018). "Adverse childhood experiences study." Retrieved from <https://www.cdc.gov/violenceprevention/acestudy/index.html>.

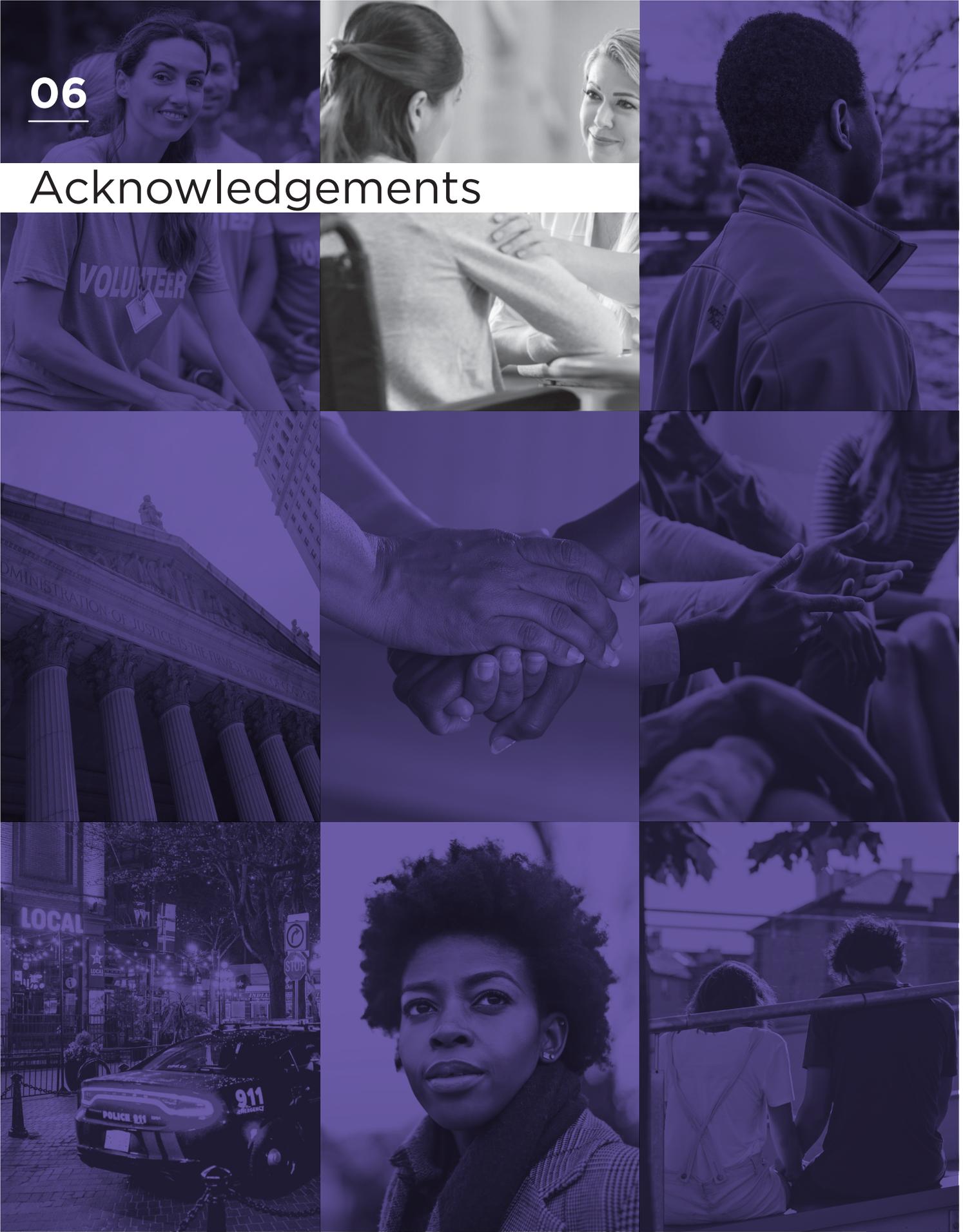
- Davies, J. (2002). "Policy Blueprint Domestic Violence and Poverty: A Policy and Practice Paper." National Resource Center on Domestic Violence. Retrieved from <https://www.bcsdv.org/wp-content/uploads/2015/09/BCS-Pub15.pdf>.
- Davis, A. (2008). "Interpersonal and Physical Dating Violence Among Teens." The National Council on Crime and Delinquency Focus. Retrieved from http://www.nccd-crc.org/nccd/pubs/2008_focus_teen_dating_violence.pdf.
- Decker, M., Silverman, J., Raj, A. (2005). "Dating Violence and Sexually Transmitted Disease/HIV Testing and Diagnosis Among Adolescent Females." *Pediatrics*, 116: 272–276.
- Eke, A., Hilton, N.Z., Meloy, J.R., Mohandie, K., & Williams, J. (2011). "Predictors of Recidivism by Stalkers: A Nine-year Followup of Police Contacts." *Behavioral Sciences and the Law*, 29: 271–283.
- Elliott, K., & Lemeshka, N. (2017). "Stalking: The Forgotten Lethality Indicator." Presentation at the Conasauga Family Violence Alliance Conference, Dalton, Ga., October 2017.
- Everytown for Gun Safety (2017). "Mass Shootings in the United States: 2009–2016." Everytown for Gun Safety Support Fund. (Points to Sorensen S, Schut R. (2016) "Nonfatal Gun Use in Intimate Partner Violence: A Systematic Review of the Literature." *Trauma, Violence, & Abuse*. Retrieved from <http://journals.sagepub.com/doi/pdf/10.1177/1524838016668589>).
- Everytown for Gun Safety (2018). "Guns and Domestic Violence." Everytown for Gun Safety Support Fund. Retrieved from <https://everytownresearch.org/guns-domestic-violence/>.
- Fifth & Pacific Companies, Inc. (formerly Liz Claiborne, Inc.). (2010). "College Dating Violence and Abuse Poll," retrieved from <https://www.breakthecycle.org/surveys>.
- Georgia Bureau of Investigation. (September 2018a). *GBI Crime Statistics Database*. Retrieved from <https://gbi.georgia.gov/gbi-crime-statistics-database>.
- Gilchrist, G., & Hegarty, K. (2017). "Tailored integrated interventions for intimate partner violence and substance use are urgently needed." *Drug & Alcohol Review*, 36(1), 3. doi:10.1111/dar.12526.
- Gill, A. & Lovelace-Davis, T. (2016). "Life in the Margins — Expanding Intimate Partner Violence Services for Women of Color by Using Data as Evidence: A National Technical Assistance Guidance." Women of Color Network, Inc., Harrisburg, Penn.
- Glass, N., Laughon, K., Campbell, J., Block, C.R., Hanson, G., Sharps, P.W., & Taliaferro, E. (2008). "Non-fatal strangulation is an important risk factor for homicide of women." *Journal of Emergency Medicine* 35(3), (October): 329–335. Retrieved from <https://www.ncbi.nlm.nih.gov/pubmed/17961956>.
- Gottlieb, M. (1999). *The Angry Self: A comprehensive approach to anger management*. Phoenix, AZ: Zeig, Tucker & Co.
- Grunbaum, J.A., Kann, L., Kinchen, S., Ross, J, Hawkins, J., Lowry, R., Collins, J. (2004). "Youth Risk Behavior Surveillance—United States, 2003." *Morbidity and Mortality Weekly Report*. 53(SS02); 1–96. Retrieved from <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5302a1.htm>.
- Humane Society of the United States (2008). "First Strike: The Violence Connection." Points to Ascione, F., Weber, C. V., & Wood, D. S. (1997). "The abuse of animals and domestic violence: A national survey of shelters for women who are battered." *Society and Animals*, 5, 205–218. Retrieved October 24, 2018, from http://www.humanesociety.org/assets/pdfs/abuse/first_strike.pdf.
- Johnson, T.C. (2018). *Survivors' Experiences of Pet Abuse Within the Cycle of Domestic Violence*. (Doctoral dissertation). Retrieved from ProQuest.
- Klein, A. R. (2006). "Enforcing Domestic Violence Firearm Prohibitions: A Report on Promising Practices." Office on Violence Against Women, National Center of Full Faith and Credit. Retrieved from http://www.bwjp.org/assets/documents/pdfs/enforcing_domestic_violence_firearm_prohibitions.pdf.
- Klein, A.R. (1996) "Re-abuse in a Population of Court-restrained Male Batterers: Why Restraining Orders Don't Work," in E. Buzawa and C. Buzawa, eds., *Do Arrests and Restraining Orders Work?* (Thousand Oaks, CA: Sage, 1996), 192–213.
- Lisco, C., Haddon, M. (2018). Presentation deck on the Georgia Teen Advocates Network at the Georgia Commission on Family Violence 24th Annual Conference, Jekyll Island, Ga., September 2018.

- Love Is Respect (2015). Dating Abuse Statistics. Austin, Texas: National Domestic Violence Hotline. Retrieved from https://www.loveisrespect.org/pdf/Dating_Abuse_Statistics.pdf.
- Love Is Respect (2018). *Georgia State Report*. Austin, Texas.
- Mary Kay (2012). “The Truth About Abuse Survey Report: National Findings from Second Survey of Domestic Violence Shelters in the United States.” Retrieved from http://content2.marykayintouch.com/public/PWS_US/PDFs/company/2012Survey.pdf.
- McFarlane, J., Campbell, J., Wilt, S., Sachs, C., Ulrich, Y., & Xu, X. (1999). “Stalking and Intimate Partner Femicide.” *Homicide Studies* 3(4) (November): 300–316.
- Mohandie, K., Meloy, J.R., Green McGowan, M., & Williams, J. (2006). “The RECON Typology of Stalking: Reliability and Validity Based Upon a Large Sample of North American Stalkers.” *Journal of Forensic Sciences* 51(1) (January): 147–155. Retrieved from https://victimsofcrime.org/docs/default-source/src/mohandie-k-meloy-r-green-mcgowan-m_-williams-j-2005.
- National Center on Protection Orders and Full Faith and Credit (2015). *Firearm checklist for prosecutors*. Retrieved from <http://www.bwjp.org/assets/documents/pdfs/ncpoffc-firearm-checklist-prosecutors.pdf>.
- National Child Traumatic Stress Network (2018a). “Ages and Developmental Stages: Symptoms of Exposure.” Retrieved from <http://www.nctsn.org/content/ages-and-developmental-stages-symptoms-exposure>.
- National Child Traumatic Stress Network (2018b). “Resilience and Child Traumatic Stress.” Retrieved from https://www.nctsn.org/sites/default/files/resources/resilience_and_child_traumatic_stress.pdf.
- National Coalition Against Domestic Violence (2015). *Facts About Domestic Violence and Economic Abuse*. Retrieved from https://www.speakcdn.com/assets/2497/domestic_violence_and_economic_abuse_ncadv.pdf.
- National Domestic Violence Fatality Review Initiative (2018). *National Domestic Violence Fatality Review Initiative Family of Sites*. Retrieved in August 2018 from <https://ndvfri.org/review-teams/>.
- National Domestic Violence Hotline (2018). *Georgia State Report*. Austin, Texas.
- Nnawulezi, N. & Sullivan, C. (2013). “Racial Microaggressions within Domestic Violence Shelters.” *Journal of Black Psychology*. Retrieved October 24, 2018, from <http://journals.sagepub.com/doi/abs/10.1177/0095798413500072>.
- Patton, Clarence (2007). “Anti-Lesbian, Gay, Bisexual and Transgender Violence in 2006: A Report of the National Coalition of Anti-Violence Programs.” Retrieved from https://avp.org/wp-content/uploads/2017/04/2006_NCAVP_HV_Report.pdf.
- Peterson, S. (2018a, June 11). “Complex Trauma: Effects.” Retrieved from <https://www.nctsn.org/what-is-child-trauma/trauma-types/complex-trauma/effects>.
- Peterson, S. (2018b, March 19). “Traumatic Grief: Effects.” Retrieved from <https://www.nctsn.org/what-is-child-trauma/trauma-types/traumatic-grief/effects>.
- Porter, J. L., & Williams, L. M. (2011). “Auditory Status and Experiences of Abuse Among College Students.” *Violence & Victims*, 26(6), 788. Retrieved October 24, 2018, from <http://connect.springerpub.com/content/sgrvv/26/6/788>.
- Rosado, L. (2000). “The Pathways to Youth Violence; How Child Maltreatment and Other Risk Factors Lead Children to Chronically Aggressive Behavior.” Washington, DC: American Bar Association.
- Saltzman, L.E., Mercy, J.A., O’Carroll, P.W., Rosenberg, M.L., Rhodes, P.H. (1992). “Weapon Involvement and Injury Outcomes in Family and Intimate Assaults.” *JAMA*, 267(22): 3043–3047.
- Schmidt, M., Kolodinsky, J., Carsten, G., Schmidt, F., Larson, M., & MacLachlan, C. (2007). “Short Term Change in Attitude and Motivating Factors to Change Abusive Behavior of Male Batterers after Participating in a Group Intervention Program Based on the Pro-Feminist and Cognitive-Behavioral Approach.” *Journal of Family Violence*, 22(2), 91. doi:10.1007/s10896-007-9064-4.
- Silverman, J., Raj, A., Mucci, L.A., Hathaway, J.E. (2001) “Dating Violence Against Adolescent Girls and Associated Substance Use, Unhealthy Weight Control, Sexual Risk Behavior, Pregnancy, and Suicidality” *JAMA*. 2001; 286(5): 572–579. doi:10.1001/jama.286.5.572.

- Smith, S.G., Chen, J., Basile, K.C., Gilbert, L.K., Merrick, M.T., Patel, N., ...Jain, A. (2017). *The National Intimate Partner and Sexual Violence Survey (NISVS): 2010–2012 State Report*. National Center for Injury Prevention and Control, Centers for Disease Control and Prevention.
- Sorenson, S. B., & Wiebe, D. J. (2004). “Weapons in the Lives of Battered Women.” *American Journal of Public Health*, 94(8), 1412–1417. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1448464/>.
- Stuart, G. L., O’Farrell, T. J., Leonard, K., Moore, T. M., Temple, J. R., Ramsey, S. E., & ... Monti, P. M. (2009). “Examining the Interface Between Substance Misuse and Intimate Partner Violence.” *Substance Abuse: Research & Treatment*, (3), 2–529.
- Sullivan, C., et. al. (1992). “After the Crisis: A Needs Assessment of Women Leaving a Domestic Violence Shelter.” *Violence and Victims*, 7, 267.
- Tahirih Justice Center and Coalition of National Organizations (2017). *Key Findings: 2017 Advocate and Legal Service Survey Regarding Immigrant Survivors*. Retrieved from <http://www.tahirih.org/wp-content/uploads/2017/05/2017-Advocate-and-Legal-Service-Survey-Key-Findings.pdf>.
- Temple, J.R., Stuart, G.L., O’Farrell, T. J. (2009). “Prevention of Intimate Partner Violence in Substance-Using Populations.” *Substance Use & Misuse*, 44(9/10), 1318–1328.
- Tharpe, W., Butler, T., Johnson M., Sweeney, T., & Robinson, C. (2013). “State of Working Georgia 2013: Georgians Struggle to Emerge from Shadow of Great Recession.” Georgia Budget & Policy Institute. Retrieved from <https://gbpi.org/wp-content/uploads/2013/10/State-of-Working-Georgia-2013.pdf>.
- U.S. Conference of Mayors (2012). “Status Report on Hunger and Homelessness.” Retrieved from <https://www.acf.hhs.gov/domestic-violence-and-homelessness>.
- Vann, Antonia A. (2003). “Developing Culturally-Relevant Responses to Domestic Abuse: Asha Family Services, Inc.” National Resource Center on Domestic Violence.
- Violence Policy Center (2018). “When Men Murder Women: An Analysis of 2016 Homicide Data.” Retrieved from <http://vpc.org/studies/wmmw2018.pdf>.
- Websdale, N. (1999). *Understanding Domestic Homicide*. Lebanon, NH: Northeastern University Press.
- Women of Color Network, Inc. (2016). “Domestic Violence in Communities of Color.” Facts & Stats Collection. Retrieved from https://www.doj.state.or.us/wp-content/uploads/2017/08/women_of_color_network_facts_domestic_violence_2006.pdf.
- Zeoli, A. (2017). “Non-Fatal Firearm Uses in Domestic Violence.” *Battered Women’s Justice Project*. Retrieved from <http://www.preventdvgunviolence.org/nonfatal-gun-dv-zeoli-.pdf>.
- Zeoli, A. (2018a). “Analysis of the Strength of Legal Firearms Restrictions for Perpetrators of Domestic Violence and their Association with Intimate Partner Homicide” webinar. National Domestic Violence and Firearms Resource Center (Safer Families Safer Communities) and Battered Women’s Justice Project. Retrieved from <http://www.bwjp.org/assets/documents/pdfs/webinars/2-26-18-ppt-1-slide-per-page.pdf>.
- Zeoli, A. (2018b). “Children, Domestic Violence, and Guns.” The National Resource Center on Domestic Violence and Firearms (Safer Families Safer Communities). Retrieved from <http://www.preventdvgunviolence.org/children-domestic-violence-and-guns-022118.pdf>.
- Zeoli, A. M., Rivera, E. A., Sullivan, C. M., & Kubiak, S. (2013). “Post-Separation Abuse of Women and Their Children: Boundary-setting and Family Court Utilization among Victimized Mothers.” *Journal of Family Violence*, 28(6), 547–560. <http://doi.org/10.1007/s10896-013-9528-7> Points to Johnson & Sacco, 1995; Wilson & Daly, 1993. Retrieved from <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3743119/>.

06

Acknowledgements



FATALITY REVIEW PROJECT STAFF

The 2018 Georgia Domestic Violence Fatality Review Annual Report was written by Project Coordinators Niki Lemeshka (GCFV) and Taylor Thompson Tabb (GCADV).

The Georgia Commission on Family Violence (GCFV) and the Georgia Coalition Against Domestic Violence (GCADV) are grateful to the many individuals who have made Georgia's Domestic Violence Fatality Review Project possible.

We must also acknowledge the commitment and contributions of all past Project Coordinators: Jenny Aszman, Greg Loughlin, Jasmine Miller, Lindia Roberts, Jennifer Thomas and CJ Williams. Their dedication and hard work greatly contributed to the success of this Project.

Fatality Review is difficult work, both for the Fatality Review Teams and for Project staff. We want to acknowledge the Project staff could not have successfully conducted our work and completed this report without the support, analysis and feedback from our colleagues. Special thanks to our coworkers for assistance on this Project:

GCFV

Jennifer Thomas, Executive Director
 Jenny Aszman, Program Manager
 Jameelah Ferrell, FVIP Certification Coordinator
 Terri Powe, Supporting Survivors of Murder-Suicide Coordinator
 Stacey Seldon, Family Violence Coordinator
 Meredith Stepp, FVIP Compliance Coordinator

GCADV

Jan Christiansen, Executive Director
 Fatmeh Baidoun, Public Policy Analyst
 Letitia Burr, Disabilities Project Manager
 Alexis Champion, Training Manager
 Trish Hardy, Capacity and Technical Assistance Manager
 Hannah Illies, Communications Coordinator
 Deborah Monley, Operations Manager
 Shenna Morris, Director of Policy and Community Engagement
 Christy Showalter, Associate Director
 Michelle White, Child and Youth Project Manager
 Leona Williams, Special Projects Coordinator

SPECIAL THANKS

A special acknowledgment goes to the survivors who have shared their experiences with us, and to the family members and friends of homicide victims who were willing to discuss the struggles their loved ones faced.

Our special thanks to Jenny Aszman (GCFV), Jan Christiansen (GCADV), Jennifer Thomas (GCFV) and Stephanie Woodard (Solicitor General of Hall County and GCFV Chair) for their editorial contributions to this Annual Report.

We are grateful to Fatmeh Baidoun and Susi McGhee who conducted data analysis and editing for the Project. We are also grateful to Allison Smith-Burk and Dr. Mary Finn for their past contributions with data analysis.

We are thankful for Debbie Lillard Liam (Mosaic Counseling, Inc.), who provided the Project with trauma expertise.

We appreciate Shelley A. Senterfitt (Attorney at Law), who provided legal research and counsel when we initiated the Project and for the first several years.

Our special appreciation goes to the National Domestic Violence Fatality Review Initiative for providing ongoing support and technical assistance throughout the Project's 15 years as well as to the Washington State Coalition Against Domestic Violence for the guidance and technical assistance provided in our first years completing Fatality Reviews in Georgia.

We would also like to acknowledge the commitment and contributions of past GCFV and GCADV executive staff, whose role in the development and support of this Project cannot be understated: Rebecca Bukant DeHart (former Executive Director, GCFV), Beck Dunn (former Executive Director, GCADV), Nancy Grigsby (former Executive Director, GCADV), Nicole Lesser (former Executive Director, GCADV), Greg Loughlin (former Executive Director, GCFV) and Kirsten Rambo (former Executive Director, GCFV).

REVIEW TEAMS AND ADVISORY COMMITTEE

We acknowledge the commitment of the Fatality Review Teams (FRTs) from around the state who devoted their time, energy and expertise to work towards creating safer communities. The FRTs listed below participated in case reviews between 2004–2018. During the Project's 15 years, FRTs from 24 of Georgia's 49 Judicial Circuits participated in the Project, representing

rural, suburban and urban areas of the state. In the instance that the entire Judicial Circuit did not participate, the primary participating county is listed.

Appalachian Judicial Circuit
 Atlanta Judicial Circuit
 Augusta Judicial Circuit (Richmond County)
 Bell-Forsyth Judicial Circuit
 Blue Ridge Judicial Circuit
 Chattahoochee Judicial Circuit (Muscogee County)
 Clayton Judicial Circuit
 Cobb Judicial Circuit
 Conasauga Judicial Circuit
 Douglas Judicial Circuit
 Eastern Judicial Circuit
 Griffin Judicial Circuit (Fayette County)
 Gwinnett Judicial Circuit
 Houston Judicial Circuit
 Macon Judicial Circuit (Bibb County)
 Mountain Judicial Circuit
 Northeastern Judicial Circuit (Hall County)
 Northern Judicial Circuit (Hart County)
 Piedmont Judicial Circuit
 Rockdale Judicial Circuit
 Rome Judicial Circuit
 Southern Judicial Circuit (Lowndes County)
 Stone Mountain Judicial Circuit
 Tifton Judicial Circuit

Additional thanks go to the 887 individual members of these 24 Fatality Review Teams who met statewide during the Project's 15 years. The work this Project has accomplished during that time would not have been possible without the dedication of these individuals.

During the Project's first years of operation, we received guidance and support from a committee of advisors whose dedication to the Project was vital to our early success. We appreciate the leadership of our past Fatality Review Project Advisory Committee members.

PRODUCTION SUPPORT

Printing: H&W Printing, Inc., Marietta, GA
 Creative: Two Way Dialogue, LLC, Atlanta, GA

We would also like to acknowledge past production support from Canterbury Press, Glennon Design Group, Grace Design, LLC, and Nancy Dickinson.

FINANCIAL SUPPORT

The Project was supported by subgrants W16-8-071 and W16-8-075 awarded by the Criminal Justice Coordinating Council administering office for the STOP Formula Grant Program. The opinions, findings, conclusions and recommendations expressed in this publication are those of the authors and do not necessarily reflect the views of the Criminal Justice Coordinating Council or the U.S. Department of Justice, Office on Violence Against Women.

The Georgia Coalition Against Domestic Violence (GCADV) brings together member agencies, allied organizations, and supportive individuals who are committed to ending domestic violence. Guided by the voices of survivors, we work to create social change by addressing the root causes of this violence. GCADV leads advocacy efforts for responsive public policy and fosters quality, comprehensive prevention and intervention services throughout the state. Being a coalition means working together for a common cause. We know that now and in the years to come, we will be up against enormous challenges which promise to test our capacity for conviction and perseverance. It is as vital as ever that we remember the foundation for the future success of this Coalition lies in our hands, all of us, collectively. As we coalesce around our common cause, we do so with the voices of domestic violence survivors and their needs for safety always in the forefront of our minds. To learn more or get involved, visit GCADV.org.

The Georgia Commission on Family Violence (GCFV) is a state agency created by the Georgia General Assembly in 1992 to develop a comprehensive state plan for ending family violence in Georgia. GCFV works throughout the state to help create and support task forces made up of citizen volunteers working to end domestic violence in their communities. In addition, GCFV conducts research and provides training about domestic violence, monitors legislation, and other policies impacting victims of domestic violence, certifies all of Georgia's Family Violence Intervention Programs, and coordinates the statewide Domestic Violence Fatality Review Project with GCADV. GCFV is administratively attached to the Department of Community Supervision (DCS). Please visit gcfv.georgia.gov for more information.

Disclaimer: The views, opinions, findings and recommendations expressed in the Georgia Domestic Violence Fatality Review Project Annual Report do not necessarily reflect the views of individual GCFV Commission members, all GCADV member programs, funders or individual team members, and are the product of analysis by the joint GCFV and GCADV Project Team.



GCADV

114 New Street, Suite B, Decatur, GA 30030

(404) 209-0280 | gcadv.org



Georgia
Commission on
Family
Violence

270 Washington Street, SW, Suite 5145, Atlanta, GA 30334

(404) 657-3412 | gcfv.georgia.gov

GeorgiaFatalityReview.com